



Health Facility Readiness and Service Availability (HFRSA) Assessment

Republic of Vanuatu

May 2021





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every childbirth is safe and
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Health Facility Readiness and Service Availability (HFRSA) Assessment

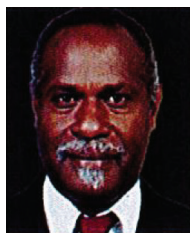
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Foreword



The COVID-19 crisis has become the central priority for the Ministry of Health (MOH), but the existing needs of the population continue, including Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH).

Despite the necessary change of focus in such unprecedented times, for the first time in the history of Vanuatu, a national comprehensive Health Facility Readiness Services Availability and Assessment (HFRSAA) survey was conducted over a total of 159 health facilities, both public and private. The summary of the key findings of the survey included Family Planning; Antenatal and Postnatal Care; Delivery Services; Reproductive Health Commodities, and Other Health Services. The survey showed that no facility provided a 100 percent complete and secure service to the local population, at the time of the assessment. These findings have yet again unveiled the need for the Government and the Ministry of Health to rethink its policies and priorities in the allocation of its resources to combat and correct the findings of the survey.

The key recommendations identified the need to have trained and skilled personnel to manage the facilities; adequate and appropriate equipment; capacity development of services delivery and system processes; and improvement in health information systems. These are issues that remain in the MOH for years on end, and will take time to be properly addressed considering the emergence of new diseases such as COVID-19 and lack of available resources for systems development and service delivery. So far a number of policies have been developed to address these gaps and they include National Sustainable Development Plan 2016-2030; Role Delineation Policy of 2018; The Health Sector Strategy (HSS) 2021-2030; Vanuatu Digital Health Strategy 2019-2021; The 2017-2021 National Strategic Plan on HIV and STIs; the RMNCAH Policy Strategy and Implementation Plan 2021-2025; Vanuatu Medical Supply Chain Management; Vanuatu Gender Equality Policy 2020-2030; The Vanuatu Youth Policy 2019-2024; and many other related policy documents.

There have been positive decisions adopted and taken through the development of policy and priority directions to address these recurring issues as identified in the key findings. I sincerely would like to call upon the continuous support from Development Partners to help the Ministry of Health address these findings. There is no better working strategy to build on our common weaknesses than building a strong relationship now and together we can build a better health system for the people of Vanuatu.



Hon. Silas Bule MELVE (MP)
Minister of Health



Acknowledgements



Vanuatu conducted its Health Facility Readiness Availability (HFRSA) Assessment in October and November 2020. The assessment focused on Hospitals, Health Centers, Dispensaries and Clinics nationwide. These health facilities from both the public and private sector are categorized as Service Delivery Points with roles to deliver on basic to more advanced medical care and treatment including services on Sexual Reproductive Health and Sexual Gender Based Violence, with an ability to administer the Ministry of Health Essential Drug List. These facilities are located across 33 of the 83 islands in the country.

This HFRSA assessment is the first of its kind ever to be done by the MOH in Vanuatu and the wealth of data it has been able to amass from the survey using the latest technology has been missing from MOH policy and planning in decision-making over the last 41 years. The assessment has opened up a window of opportunity for the MOH to reflect back on its strengths and weaknesses over the breadth of health services it has provided to the people of Vanuatu. The HFRSA assessment has come at an opportune time to inform the Health Sector Strategy, RMNCAH Policy, Strategy and Implementation Plan, and recovery from Tropical Cyclone Harold and preparedness for Covid-19. This has enabled MOH to rethink its course and the best way forward in terms of its limited recurrent funding resources, insufficient trained and skilled health workers, inadequate service delivery support for the more basic services as water, lighting, housing, trainings, supervision, quality of medications and making the right decisions at the right time, to improve the lives of people across Vanuatu, which is fundamental to improve the health status of the population.

The knowledge contained in this report would not have been possible without both the funding support as well as the technical input of the United Nations Population Fund (UNFPA) Pacific, and John Snow Inc. (JSI) which the MOH is greatly indebted to. For UNFPA Pacific, I would like to acknowledge the support from Dr Jennifer Butler, Director and Representative; Ms Saira Shameem, Deputy Director; and Ms Olanike Adedeji, RHCs Technical Advisor for their unwavering support for the course of the assessment. Similarly, for JSI, I would like to thank Ms Ariella Bock, Senior Technical Adviser (Research, Monitoring & Evaluation) for staying with the Vanuatu Team and monitor the HFRSA assessment through to completion. For the MOH, I would like to single out Mr Len Tarivonda, Director of Public Health, for his tremendous support in ensuring that the assessment is done and its completed. For data collectors at national and provincial level, you have all done so well to facilitate the assessment and I believe you have learnt more of the challenges and issues we continually experience in the delivery of our service to the people of Vanuatu.

My special thanks to Ms. Emily Deed, SRH Specialist, UNFPA Vanuatu Office, for her tireless commitment to see to the completion of the report from the beginning through to the end. And of course, there are many whom I will have missed. I would like to thank you also for the different support and capacity you have contributed to create this landmark not only for the Ministry of Health but for the people of Vanuatu.

Dr Samuel Tapo Posikai
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Acronyms

ABR	Adolescent Birth Rate
AIDS	Acquired Immunodeficiency Syndrome
AMTSL	Active Management of Third Stage of Labour
ANC	Antenatal Care
AYF	Adolescent and Youth-Friendly
BEmONC	Basic Emergency Obstetric and Newborn Care
CEmONC	Comprehensive Emergency Obstetric and Newborn Care
CMS	Central Medical Stores (Vanuatu)
COC	Combined Oral Contraceptive
ECP	Emergency Contraceptive Pills (pre-packed)
EDL	Essential Drug List (Vanuatu)
EmONC	Emergency Obstetric and Newborn Care
FP	Family Planning
GBV	Gender-Based Violence
HC	Health Centres (secondary facility level in Vanuatu)
HIV	Human Immunodeficiency Virus
HFRSA	Health Facility Readiness and Service Availability
HMIS	Health Management Information Systems
HPV	Human Papillomavirus
IEC	Information, Education, and Communication
IMR	Infant Mortality Rate
IUCD	Intrauterine Contraceptive Device
JSI	John Snow, Inc.
MCH	Maternal and Child Health
mCPR	Modern Contraceptive Prevalence Rate
MDG	Millennium Development Goal
MH	Maternal Health
MOH	Ministry of Health (Vanuatu)
NCD	Non-Communicable Disease
NPH	Northern Provincial Hospital (Regional Referral Hospital-Vanuatu)
NSPD	National Sustainable Development Plan (Vanuatu 2030 The People's Plan)
PEP	Post-Exposure Prophylaxis
PICT	Pacific Island Countries and Territories
PNC	Postnatal Care
PSRO	Pacific Subregional Office
PMTCT	Prevention of Mother to Child Transmission
RMNCAH	Reproductive, Maternal, Newborn, Child, and Adolescent Health
RDP	Role Delineation Policy (Vanuatu)
SDG	Sustainable Development Goal
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infection
TFR	Total Fertility Rate
ToT	Training of Trainers
U5MR	Under-5 Mortality Rate
UNFPA	United Nations Population Fund
VCH	Vila Central Hospital (National Referral Hospital-Vanuatu)
VCT	Voluntary Counselling and Testing
VDHS	Vanuatu Demographic Health Survey
VHFA	Vanuatu Family Health Association
VHW	Village Health Workers
VIA	Visual Inspection with Acetic Acid
VWC	Vanuatu Women's Centre
WHO	World Health Organization

Summary of Key Findings: Republic of Vanuatu



Family Planning

- **96%** of facilities provide family planning services
- **38%** of facilities are FP service ready*
- **65%** of 112 primary level facilities had 3 or more methods of FP available on day of visit
- **13%** out of 47 secondary/tertiary level facilities had 5 or more methods of FP available on day of visit



Delivery Services

- **55%** of facilities routinely provide delivery services
- **0%** of facilities providing deliveries are ready to provide for vaginal deliveries^
- **1%** of facilities providing deliveries comply with global safe delivery practices^
- **2%** of facilities providing all signal functions of basic emergency obstetric and newborn care (BEmONC)^
- **92%** of facilities providing active management of third stage of labour (AMTSL) services



Other Health Services

- **12%** of facilities provide secondary prevention of cervical cancer services
- **16%** of facilities provide HIV and AIDS Services
- **81%** of facilities provide STI Services
- **8%** of facilities are STI (including HIV) service ready*
- **0%** of facilities are able to provide minimum services for gender-based violence (GBV) that meet global standards (**54%** of facilities reported offering at least one GBV service)



Antenatal and Postnatal Care

- **70%** of facilities provide ANC services
- **62%** of facilities provide PNC care
- **5%** of facilities are ANC and PNC service ready*



Other Services

- **0%** of facilities provide adolescent and youth-friendly (AYF) services according to global standards†
- **15%** of facilities have staff trained to work with people with disabilities



Commodity and Health Management Information Systems

- **43%** of facilities have staff trained in logistics management for health supplies
- **48%** of facilities having staff trained in assessing stock, including knowledge of minimum and maximum stock balances
- **50%** of facilities received FP supervision visits in the previous 6 month

Key Recommendations

- **Ensure** that all facilities have skilled and competent staff, guidelines, necessary equipment and medicine available at all times for comprehensive reproductive health services including safe childbirth and GBV response services in line with RDP.
- **Ensure** facilities are equipped to provide comprehensive and AYF reproductive health and GBV services, in line with minimum global standards.
- **Strengthen** the capacity of health providers in health and logistics management, especially stock card usage.
- **Rollout updated** logistics management tools and practices, including stock cards, ordering and resupply forms, and data reporting, and ensure their availability at each level of the supply chain in line with current policies.
- **Continue rollout of update** health management information system tools, including registries and reports, and practices for reporting to higher levels.
- **Adopt** a twin-track approach to ensure the availability of disability-inclusive and fully accessible SRH and GBV services.

* Service ready is a composite indicator based on availability of guidelines, specific equipment, products and trained staff

^ See page 7 of methodology for indicator definition and criteria. These results are lower than expected due to the absences of functional delivery equipment such as examination lights and pulse oximeters in many facilities.

† See page 28 for list of AYF service components

1. Introduction

As part of efforts to support the “Transformative Agenda for Women, Adolescents and Youth in the Pacific” and to strengthen access to quality integrated sexual and reproductive health (SRH) services, UNFPA Pacific Subregional Office (PSRO) and national governments, along with John Snow, Inc. (JSI) providing technical support, partnered to carry out the Health Facility Readiness and Service Availability (HFRSA) assessment. Using a standardized methodology, the HFRSA assessment provides baseline information on the availability and potential to provide essential reproductive and maternal health services including family planning (FP), safe motherhood (i.e. antenatal care, postnatal care, and childbirth/delivery), youth-friendly, HIV and sexually transmitted infections (STI), as well as the availability of contraceptives and essential medicines. The findings from the HFRSA assessments are intended to inform and support national governments strategies for strengthening workforce capability to deliver quality integrated SRH services and efforts to respond to commodity stockouts and move towards more predictable, planned and sustainable country-driven approaches for securing essential supplies and ensuring their use.

1.1. Country Context

Vanuatu (officially the Republic of Vanuatu/ République de Vanuatu/Ripablik blong Vanuatu), is an island country consisting of a chain of 13 principal and many smaller islands covering a total area of 12,274 square kilometres (of which only 4,700 square kilometres (1,800 sq. mi) is land.) It is located west of Fiji and east of Australia in the South Pacific Ocean. It is currently ranked 140 out of 189 countries, according to the 2020 UNDP Human Development Index, and is considered a lower middle-income country by the World Bank.

As of 2020, Vanuatu's population is approximately 301,700 with youth (under 30) accounting for two-thirds of the overall population.¹ Vanuatu's three largest islands - Espiritu Santo, Malakula, and Efate - accommodate over half of the populace. Over three-quarters of the population lives in rural areas with the urban populace living primarily in two cities--Port-Vila (Efate) and Lugenville (Espiritu Santo).² Vanuatu's estimated population growth rate (2.3%) is the highest in the Pacific region and is driven by continuously high total fertility rate (TFR). As of 2019, the World Bank estimates the TFR to be 3.7, suggesting improvement since 2013 when it was estimated to be 4.2.³ According to the 2013 Vanuatu Demographic Health Survey (VDHS), the TFR was marginally higher for rural women (4.7) than for urban women (3.3) but real distinctions lay between Rural 1 (rural areas near Port Vila or Luganville) and Rural 2 areas.⁴

Use of modern family planning is limited, especially among younger women. According to the 2013 VDHS, only 29% of women were using a modern contraceptive method, including 7% for ages 15-19 and 25% for ages 20-24. Among married women, the modern contraceptive prevalence rates (mCPR) were 37% for all women, 26% for women ages 15-19 and 31% for ages 20-24. Additionally, over 24% of married women have an unmet need for family planning, including 33% and 29% of women ages 15-19 and 20-24 respectively. The lack of contraceptive use among younger women is also recognizable, as Vanuatu has with one of the highest adolescent (15-19) birth rates (ABR) in the region at 81 per 1,000 women—an increase from 66 (40 urban and 77 rural) in 2009.³ Unverified data from the Vanuatu Health Information System reports indicate slight fluctuations over the years, but continuously high ABR (63 in 2015, 49 in 2016, 77 in 2017, 70 in 2020).^{3,5}

Despite the low mCPR, Vanuatu has met or is on track to meet most of health targets set by the 2020 *National Sustainable Development Plan* (NSDP). As of 2013, the infant mortality rate (IMR) was 28/1,000 live births while the under-five mortality rate (U5MR) has fallen to an estimated 25.9/1,000 live births, down from 31/1,000 live births in 2013.^{3,5} The NSDP targets have set the IMR and U5MR at 29/1,000 live births. Current maternal mortality ratio (MMR) estimates range from 72-76 maternal deaths per 100,000 live births, which is below the NSDP 2020 target of 80 per 100,000 live births.³ According to the Ministry of

Health (MOH) 2020 Annual Report, nearly 92% of deliveriesⁱ were supervised and attended by skilled health personnel in the facility.⁵ However, according to the 2013 VDHS only 76% of women attended at least one antenatal care clinic visit with a qualified doctor, midwife, registered nurse or nurse aide during their most recent pregnancy. Similarly, only 52% of pregnant women attended four or more ANC visits prior to delivery.⁴ The recent 2020 MOH Annual Report notes that updated data on these indicators was not available.

Vanuatu's high and growing burden of non-communicable diseases (NCDs) has had significant impact on life expectancy rates, which have been stagnant since the early 1990s. The World Health Organization (WHO) estimates that NCDs, and more specifically circulatory diseases, cancers, chronic respiratory disease and diabetes accounted for 74% of all deaths in Vanuatu in 2018, a slight increase from 70% in 2000.^{6,7} According to Vanuatu's last NCD Risk Factor STEPS survey, conducted in 2013, 51% of the population were overweight or obese, with significantly more women registering as obese (56%) compared with men (46%). While the prevalence of NCDs are increasing in Vanuatu, it should be noted that according to its NCD profile, Vanuatu has lower prevalence of NCDs than many other countries in the region.

As of 2020, cervical cancer ranks as the second most frequent cancer among women in Vanuatu and the second most frequent cancer among women between 15 and 44 years of age (with breast cancer being first).^{8,9} With limited screening available many cases go undiagnosed. The WHO and the International Agency for Cancer Research estimate that every year 21 women in Vanuatu are diagnosed with cervical cancer and 13 die from the disease.⁸ In 2020, 22 cases of cervical cancer were reported to the Global Cancer Observatory database.⁹ In 2016, the *Global Burden of Disease Study* estimated that Vanuatu's incidence rate of 27.8 per 100,000 women and a mortality rate of 16.6 per 100,000 women for cervical cancer was slightly below the regional average.¹⁰ The 2018 *Estimates of Incidence and Mortality of Cervical Cancer* study found similar but slightly lower incidence and mortality rates--17.0 and 10.6 per 100,000 women.¹¹ Although the human papillomavirus (HPV) prevalence estimates are still unknown in Vanuatu, the WHO estimates that 7.7% of Melanesian women have cervical HPV-16 or HPV-18 infections at any given time, and 83% of invasive cervical cancers are attributed to HPVs-16 or -18.⁸ From 2015-2017, an HPV immunization pilot campaign on two islands-Ambrym and Makekula—in Malampa province, supported through The Frazer Family Foundation, vaccinated an estimated 3,000 girls in schools, achieving 94% coverage in targeted populations. Additionally, over 8,500 women have been screened using HPV testing kits (CareHPV, Qiagen), of which nearly 10% were found to be positive.^{12,13,14}

The number of HIV cases in Vanuatu, as in the rest of the Pacific, remains relatively low with fewer than 10 people living with HIV as 2017; the prevalence rate among adults between ages 15-49 is less than 0.02%.¹⁵ However, like elsewhere in the Pacific, prevalence of other STIs, particularly chlamydia, Hepatitis B, gonorrhoea, and syphilis are relatively high. Incidence of STIs is shown to be falling slowly overall, however inadequate testing and diagnosis masks a suspected rising epidemic, especially among young people under 25 years of age. The 2017- 2021 *National Strategic Plan on HIV and STI* estimates that 80% of cases are asymptomatic and go undiagnosed.¹⁶ In 2008, 25% of women attending antenatal clinics at the Vila Central Hospital (VCH) tested positive for chlamydia, and in the 15-24 year age bracket, 30% tested positive.¹⁷ Similar results for chlamydia were identified through voluntary testing in 2011 (26%).³ The same 2008 study found 12% of women attending antenatal clinics tested positive for Hepatitis B, 5% positive for syphilis and 3% positive for gonorrhoea, including 4.2% of women ages 15-24.¹⁷ The 2020 MOH Annual Report indicated that 8% of adults in Vanuatu were living with chronic Hepatitis B, although the highest prevalence was in adults 40 and older (source of data is unknown).⁵

Rates of violence against women and girls in Vanuatu are among the highest in the world. According to research conducted by the Vanuatu Women's Centre (VWC) in 2011, 60% of women reported to have suffered from physical and/or sexual violence from their intimate partner and 48% of women reported physical and/or sexual assault by someone other than their intimate partner. Forty-one percent of the surveyed women's first sexual experience was forced and/or unwanted.¹⁸

i The MOH 2020 Annual Reports also acknowledges that the percentage of deliveries attended by a skilled birth attendant provided in the report is an overestimation. .

1.2. Reproductive, Maternal, Newborn, Child and Adolescent Health Services

Vanuatu's health system is based on a four-tier model that provides integrated health services at community, primary, secondary and tertiary levels. Health services and programmes are delivered via a decentralised approach through six provinces— Malampa, Penama, Sanma, Shefa, Tafea and Torba— and a network of public and private/NGO facilities. As of 2019, the network of public (MOH owned/supported) facilities included one national referral hospital (Vila Central Hospital), one regional referral hospital (Northern Provincial Hospital (NPH)), four provincial hospitals, 34 health centres (HCs), 91 dispensary and more than 245 aid posts. An additional 25 clinics, HCs, and dispensaries are run by private for-profit, not-for-profit, and/or church-based organizations. The Family Health Unit (RMNCAH) within the MOH provides technical oversight for all programmes related to child health, maternal health (MH), HIV/STIs, reproductive health and gender.

Aid posts (level 6) are the lowest level health facility and serve as the first point of contact in the health system for many ni-Vanuatu, particularly those in rural areas. Aid posts provide community based care such as cleaning and dressing wounds and referring clients with signs and symptoms indicative of more serious or complex conditions to a dispensary or health centre (or a hospital – in emergencies only). Aid posts are owned by communities and village health workers (VHWs).

Dispensaries (level 5a and 5b) provide comprehensive primary healthcare services including safe motherhood (incorporating ANC, postnatal care (PNC), and preparations for delivery), infant and childcare, adolescent health care, family planning (including dispensing emergency contraceptives and insertion of implants and IUDs), screening for HIV and treatment of STI's including post – exposure prophylaxis (PEP). Dispensaries, per the 2018 *Role Delineation Policy* (RDP), can also provide intra-partum care including skilled care during normal deliveries, basic emergency obstetric newborn care (BEmONC), and higher risk deliveries in remote areas where a midwife is assigned.ⁱⁱ Dispensaries are typically staffed by a registered nurse or a midwife (if remote) and a nurse aide, and serve a local catchment population of 300-2,000. Dispensary staff also supervise aid posts and VHWs.¹⁹

Health centres (HCs—level 4a and 4b), the next level in the system, provides more advance primary care services including management of risky pregnancies, immediate and emergency care for newborn babies, and some secondary health services such as in-patient paediatric and maternity care services. Enhanced HCs (level 4b) also provides GBV care, including conducting assessments using “Sexual Assault Kits” and interacting with authorities to care for survivors. Required staffing at HCs include a nurse practitioner, a midwife, a registered nurse and a nurse aide. At enhanced HCs (level 4b), staffing also includes rural physicians. HCs have direct oversight of dispensaries within its population catchment (2,000-5,000 population including referral catchment).¹⁹

Secondary and tertiary level care, including screening (via pap smears) and treatment for cervical cancer with VIA, cryotherapy, and LETZ/LEEP, are provided in all hospitals. Provincial hospitals are expected to provide normal vaginal deliveries, early essential newborn care and BEmONC services, and in some cases emergency caesarean sections. The two referral hospitals, NPH and VHC, are expected to provide all previously listed services and Comprehensive Emergency Obstetric and Newborn Care (CEmONC).¹⁹

The privately owned facilities are not governed by the RDP so provision of health services vary by facility.¹⁹ Services range from primary level to tertiary care (tertiary care is provided at one facility – Novo Medical Centre). Private facilities receive certain programme products (including contraceptives) through the public system and submit data to the national health management information service (HMIS).

ii It should be noted that in the RDP, delivery beds are listed as part of the minimum essential equipment at dispensaries but standalone delivery rooms are only expected at remote dispensaries (Level 5b) and above.

The minimum package of essential reproductive health services, delivered by all levels of the health system, includes FP, safe motherhood (incorporating ANC, PNC, and delivery care), prevention and treatment of HIV and STIs, adolescent reproductive health, sexual violence, and cervical cancer screening and treatment. According to the recent 2019 *Reproductive, Maternal, Newborn, Child and Adolescent Health Workforce* report, an estimated 284 professionals, including 81 nurse midwives and 134 nurses, providing RMNCAH related services across the 131 facilities (excluding aid posts).²⁰

Male condoms, female condoms, combined oral contraceptive pill (Microgynon), progesterone-only pill (Microlut), pre-packed emergency contraception (NorLevo®), Medroxyprogesterone acetate (Depo), implants (Jadelle®) and copper intrauterine contraceptive device (IUCD) are included in Vanuatu's 2018 Essential Drug List (EDL), along with the health facility level designation to which the medicine has been assigned. In slight contradiction with RDP, per the EDL, dispensaries are only approved to provide condoms (male and female), combined oral contraceptive pill, and progesterone only pill while HCs are expected to provide condoms, combined oral contraceptive pill, progesterone only pill, pre-packed emergency contraception, injectables and IUCDs. Only hospitals are expected to provide Jadelle® per the EDL/RDP.²¹

Currently, the nationwide public supply of reproductive health commodities is integrated into the overall Central Medical Stores (CMS) supply chain system. Products are distributed bi-monthly by central medical stores (including NPH's Sub-CM Store) to the provincial hospital pharmacies, and then again bi-monthly down to other service delivery points. Domestic sea vessels are used to distribute products from CMS/Port Vila to NPH and from Port Vila/NPH to the provincial pharmacies. Health centres, dispensaries, aid posts and NGOs receive their products either by delivery or by picking-up, depending on the proximity of facilities to the pharmacy. Supplies are sent based on requests completed by pharmacists at hospitals, and nurse practitioners/registered nurses at the HC and dispensary levels (via provincial health managers/RH coordinators).

Data is managed by one of two systems, the electronic *mSupply* (desktop or mobile) or the paper-based system, depending on the level in the system, availability of personnel, technology and internet access. *mSupply* desktop is used at CMS/NPH and in theory at the provincial hospital pharmacies for all major logistics functions. Most lower level facilities are using ordering booklets. As of 2019 *mSupply* was down at two provincial hospitals due to IT issues, while *mSupply mobile* was being used in some Port Vila based HCs. During the 2019 Contraceptive Supply Chain Design workshop, participants noted that the system faced challenges related to human resources (both in term of staffing levels and trainings) and lack of supervision at facilities due to funding issues at the provincial level. These challenges contributed to inconsistent reporting of stock information to higher levels.²² Additionally, based on recent assessments and MOH presentations, consumption records and stock cards are not regularly used.²³

Screening of HIV and other STIs are included in the ANC package and during suspected cases of GBV. Screening/testing for HIV and STIs, however, are routinely conducted only at health centers; provincial hospitals will provide laboratory services.¹⁶ The 2017- 2021 *National Strategic Plan on HIV and STI* notes a total lack of screening and testing services at main referral hospitals during ANC visits.¹⁶ The plan also notes that the Vanuatu Family Health Association (VFHA), with health clinics in Port Vila and Luganville, provide syndromic screening for STIs as part of routine RH/FP services but will refer laboratory services (for syphilis and chlamydia) to VCH and NPH.¹⁶

Cervical cancer screening is limited, taking place primarily at provincial hospitals and VFHA clinics. Likewise, HPV vaccines, although available in country, are not widespread. In 2021, the MOH, with assistance from UNICEF, intends to roll out an HPV vaccination campaign through schools to target young women.

1.3. Reproductive, Maternal, Newborn, Child and Adolescent Related Policies

Overall SRH and FP services and targets have been incorporated into national policies and plans. The overarching, *National Sustainable Development Plan (2016-2030)* (also known as NSDP or *Vanuatu 2030* | *The People's Plan*) provides the planning and deliverable framework for all ministries and their associated agencies to report annually against the set targets in the *Annual Development Report*. The plan is closely aligned to the UN Sustainable Development Goals (SDG), including ensuring that “the population of Vanuatu has equitable access to affordable, quality health care through the fair distribution of facilities that are suitably resourced and equipped” and integrates a number of the SDG 3 targets and indicators into the plan.²⁴

The *Health Sector Strategy (HSS) 2017 -2020* and the *Vanuatu Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Policy and Implementation Strategy 2017-2020* provide guidance on the delivery of RMNCAH services at all levels of care from policy level to facilities and communities.^{25,26,iii} The RMNCAH Policy includes clear policy statement such as “improved sexual and reproductive health of adolescents and young people in Vanuatu through reduction of teenage pregnancy and STI cases, and strengthened HIV prevention” and connects statements to concrete outcomes and outputs including “provision of RMNCAH commodities, including emergency contraceptive pills for young people.” It also sets targets for reducing the maternal mortality to less than 50 maternal deaths per 100,000 live births per year (equivalent of less than 6 maternal deaths per year) and the neonatal mortality rate to less than 10 neonatal deaths per 1,000 live births per year (equivalent of less than 10 neonatal deaths per year).²⁶

The 2018 RDP, building on the 2004 RDP, identifies the minimum package of services that should be delivered through all health facilities in Vanuatu based on the above MOH strategies and policies. The RDP identifies staff requirements, including the skills, qualifications and experience needed to deliver these services. It also identifies the facility functional space, utilities and equipment requirements needed to support safe and effective delivery of clinical and public health services.¹⁹

The *Vanuatu National Youth Policy (2019-2024)*, which provides an integrated and overarching framework for the development of youth in Vanuatu, includes statements supporting youth-friendly family planning services, stating “young people’s health status is improved and supported in their family planning.”²⁷ Advocating for and supporting youth to access youth-friendly services, including counselling, is listed as a strategic objective.

Strengthening the clinical care sector and enhancing secondary and tertiary prevention of NCDs is listed as an integral component of the *Vanuatu Non-Communicable Disease Policy & Strategic Plan (2016-2020)*. Cancer preventive measures are listed as an intermediate outcome in the plan, stated as: “providing support to the EPI and RMNCAH units in increasing community awareness, conducting cervical cancer screening and delivering HPV vaccinations.”²⁸

The *National Gender Equity Policy (2015-2019)* includes reducing domestic and gender based violence as the first strategic area to “strengthen and improve protective, social and support services” as a key strategy. The plan goes on to list “survivors of violence have access to health services, counselling and support” as an indicator for the strategy.²⁹ Additionally, the *2017- 2021 National Strategic Plan on HIV and STI* identifies young people and pregnant women and girls as key priority populations. The plan includes strategic objective 2.1.8 which states, “...updating, finalizing and ensuring adherence guidance on prevention and management of gender-based and sexual violence, with a focus on adolescents, young women and children”, and strategic objective 5.1 which focuses on linkage with RMNACH for improving cross programme collaboration in these areas.¹⁶

iii Development of this report overlapped with Vanuatu MOH’s process for drafting the *Health Sector Strategy (HSS) 2021-2030* and *Vanuatu RMNCAH Policy, Strategy and Implementation Plan 2021-2025*. While updated language and targets not referenced in this report, equally strong language and targets are expected.

2. Methodology

The HFRSA assessment was designed as a census using an instrument that includes observations of physical inventory and tools (i.e. guidelines, job-aids), records and reports (i.e. stock cards, clinical registers, health management information systems reports (HMIS), as well as interviews with service providers at the sites. The instrument was divided into eleven sections:

- **Form 1:** Collects basic information about the general structure of the facility and general utilities (e.g., water, sanitation, power, etc.) through observation of the facility (interior and exterior)
- **Form 2:** Covers availability and stock records of family planning products as well as availability of other key medicines/ diagnostics/ consumables in the main storage area(s). Collected through physical count and record review of FP products, and observation of key medicines/ diagnostics/ consumables in the facility
- **Form 3:** Covers equipment and medicines needed to provide safe delivery services. Collected through observation of equipment and medicines in labor and delivery ward/room
- **Form 4:** Covers equipment that are needed to provide safe and effective ANC/PNC and FP services. Collected through observation of equipment in exam/ consultation rooms/ areas
- **Form 5:** Collects basic information about the facility, staffing level, training, service fees, use of ICT, NCD services, and supervision visits. Collected through interviews with facility in-charge and via observation of guidelines/ job-aids
- **Form 6:** Covers services practices provided during antenatal care (ANC) and postnatal care (PNC), including cervical cancer screening through interviews with person responsible for ANC and PNC services, and via observation and record review of guidelines/ job-aids and HMIS reports
- **Form 7:** Covers services/practices related to delivery and Emergency Obstetric and Newborn Care (EmONC) through interviews with persons responsible for deliveries and via observation and record review. Of guidelines/ job-aids and HMIS reports
- **Form 8:** Covers services/practices related to family planning services through interviews with facility in-charge and observations of exam rooms and guidelines/ job-aids
- **Form 9:** Collects basic information about facility services available to people with disabilities through interviews with facility in-charge and observation of facility, exam rooms, and guidelines/ job aids
- **Form 10:** Collects basic information about Adolescent and Youth-Friendly services (AYF), HIV services, and services for victims of Gender-Based Violence (GBV) through interviews with facility in-charge and observation of exam rooms and guidelines/ job aids
- **Form 11:** Collects information about current cleaning practices and COVID-19 preparations through interviews with facility in-charge or other appropriate person

Due to COVID-19 travel restriction, a remote based 3-day Training of Trainers (ToT) was conducted over Zoom in late August 2020. During the ToT, the JSI advisor took the six trainers/supervisors from UNFPA/ Vanuatu and the HMIS, planning and RMNCAH national leads from the MOH, through the questionnaire (both in hard copy and electronically) reviewed the training materials and group exercises, and how to troubleshoot when facing issue in Magpi or the tablet. In early September, 22 enumerators, plus national MOH teams from HMIS, planning and public health, participated in a 3-day training workshop led by the UNFPA/ Vanuatu and MOH trainers. The JSI Advisor provided remote support during the training including being available over Zoom to answer any technical questions and ensure consistent messaging was being provided. All the training focused on introduction and entry into health facilities, comprehension of each question and response in the assessment instruments, review of commodities and equipment, interview techniques, and use of the Magpi mobile data entry application (hereafter Magpi). (See Annex 1 for key definitions and clarifications of wording agreed upon during training.) The training also included one day of “field practice” under close supervision from UNFPA along with remote real time review by JSI.^{iv} A one-day refresher training was also held on September 30th, 2020, as data collection was delayed due to logistical reasons.

iv As all 160 facilities in the country were included in the assessment, live data were collected from facilities visited during the “field practice.” The data were reviewed immediately to ensure completeness and accuracy.

Data collection was planned in close coordination with MOH to cover 160 facilities-i.e. all public and private facilities providing RMNCAH services (see Annex 3 for list of facilities). Tables with disaggregated results by region and by facility level are available upon future request.

Data collection was primarily carried out between October 5th and November 20th, 2020, by two- to three-person teams, including one RMNCAH or PH provincial focal point and one intern from the MOH, who conducted each interview and collected data concurrently using Magpi mobile applications.^v Interviews were conducted with the facility in-charge, and with the FP provider, pharmacy, and labour ward service providers. Observations were made in the primary store room and delivery room. Before departing from the facility, the team reviewed the data for potential errors. Follow up visits to facilities occurred on occasion to account for instances of missing data and/or to verify existing data for quality purposes.

Data were uploaded daily into the Magpi platform and exported into Excel spreadsheets for easier transfer. Data were analysed by the JSI team using Stata 14 software.

2.1. Composite Indicators

While most indicators are based on direct observation or responses from the provider, the following composite indicators have been created:

Indicator	Definition/ Criteria				
Readiness of Specific Service	Facilities are considered “service ready” if they meet the following: <ul style="list-style-type: none"> • availability of services • availability of guidelines • availability of equipment • availability of commodities (FP/medicines and diagnostic tests) • availability of trained staff 				
Readiness to provide safe delivery	Facilities must have the following: <ul style="list-style-type: none"> • availability of delivery services • availability of guidelines • availability of oxytocin, magnesium sulphate, antihypertensives, calcium gluconate and antibiotics in the facility • availability/functioning equipment in the facility including: blank partograph, delivery bed, disposable sterile latex gloves, disposable nonsterile latex gloves, examination light, cord clamp, episiotomy scissors, scissors or blade to cut umbilical cord, suture material with needle, needle holder, speculum (Sims’ and Cusco’s), pulse oximeter, blood pressure apparatus, foetal stethoscope, towel for drying, infant scale, newborn masks (size 0 and size 1), and thermometer <p>Plus</p> <table> <tr> <th>Vaginal:</th><th>Assisted:</th></tr> <tr> <td> <ul style="list-style-type: none"> • Nurse or midwife </td><td> <ul style="list-style-type: none"> • Midwife or Medical officer/OBGYN • Manual vacuum extractor or forceps • Self-inflating bag and mask for resuscitation (adult) • Oxygen tank </td></tr> </table>	Vaginal:	Assisted:	<ul style="list-style-type: none"> • Nurse or midwife 	<ul style="list-style-type: none"> • Midwife or Medical officer/OBGYN • Manual vacuum extractor or forceps • Self-inflating bag and mask for resuscitation (adult) • Oxygen tank
Vaginal:	Assisted:				
<ul style="list-style-type: none"> • Nurse or midwife 	<ul style="list-style-type: none"> • Midwife or Medical officer/OBGYN • Manual vacuum extractor or forceps • Self-inflating bag and mask for resuscitation (adult) • Oxygen tank 				

^v Data were collected through January 2021. Several data corrections were submitted from facilities in Torba province to rectify data quality issues.

Indicator	Definition/ Criteria				
Safe Delivery Practices	<p>Facility meets all the following criteria is considered to have safe delivery practices:</p> <p>a. Counselling on danger signs: provide counselling on maternal and newborn danger signs during ANC and PNC services</p> <p>b. Labour and Delivery: Use of partograph, practice AMSTL^{vi}, have neonatal equipment in delivery room^{vii}, have key medicine in delivery room^{viii}</p> <p>c. Care for Mother after birth: Practices provided to mother within 1 hour and 72 hours of delivery. Assess/check:</p> <table> <tr> <th>1 hr:</th><th>72 hrs:</th></tr> <tr> <td> <ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction </td><td> <ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction post-partum FP </td></tr> </table> <p>d. Early Essential Newborn Care: skin to skin contact, breastfeeding, newborn resuscitation, eye care, vitamin K within 1 hour of birth plus provide BCG newborn immunization, Hep B newborn immunization within 1 hr or 6 weeks of birth</p> <p><i>Results are based on interviews with the midwife/nurse in the delivery unit and direct observations of equipment and medications</i></p>	1 hr:	72 hrs:	<ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction 	<ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction post-partum FP
1 hr:	72 hrs:				
<ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction 	<ul style="list-style-type: none"> temperature and pulse, blood pressure, vaginal bleeding fundal height uterine contraction post-partum FP 				
Emergency Obstetric and Newborn Care (EmONC) Services	<p>For a facility to be considered providing “Basic EmONC service”, it:</p> <ul style="list-style-type: none"> Treats for eclampsia/Pre-Eclampsia (confirmed with availability of magnesium sulphate, calcium gluconate and anti-hypertensive on day of visit) Administers uterotonic drugs (oxytocin, misoprostol or ergometrine) for prevention and treatment of post-partum haemorrhage (IV or IM) Administers parenteral antibiotics Removes retained products of conception (MVA) Performs basic neonatal resuscitation with bag and mask (confirmed with availability of functioning size 0 and 1 masks) Performs manual removal of placenta Performs instrumental delivery <p>For a facility to provide “Comprehensive EmONC service”, it:</p> <ul style="list-style-type: none"> Meets BEmONC criteria Performs C-sections Provides blood transfusions <p><i>Results are based on interviews with the midwife/nurse in the delivery unit and direct observations of equipment and medications</i></p>				

vi AMSTL: oxytocin or misoprostol is given immediately (within one minute) after birth/delivery followed by delivery of placenta through controlled cord traction and fundal massage

vii Neonatal equipment in delivery room: Mucus extractor/suction machine, size 0 and size 1 masks for neonatal resuscitation, oxygen tank, blade/scissors and cord clamp),

viii Key medicine in delivery room: sodium lactate/normal saline, oxytocin, magnesium sulfate, antibiotics, antihypertensives, and calcium gluconate

Indicator	Definition/ Criteria
Integrated Maternal and Reproductive Health Services	<p>Facilities providing the following services are considered to provide comprehensive maternal health services:</p> <ul style="list-style-type: none"> • Family planning • Antenatal • Postnatal • Delivery • Post miscarriage services <p>Facilities providing the following services are considered to provide integrated reproductive health services:</p> <ul style="list-style-type: none"> • Family planning • Antenatal • Postnatal • Delivery • Post miscarriage services • Cervical cancer screening • HIV and STI service • Adolescent and youth-friendly services • Gender-based violence services

2.2. Limitations

There are several limitations to the assessment:

- Due to COVID-19 and training conducted remotely, JSI trainers were limited in their ability to assess the effectiveness of the training and enumerator/ supervisor competency. While more remote based data quality checks were conducted, some issues were identified once data collection had been completed.
- Responses from several facilities in Torba province were updated following MOH supervision visits. One facility (Pemisas dispensary) was dropped from the final analysis and the data set, as multiple responses were identified as outside of service expectations and could not be verified during quality checks. There for analysis only includes 159 facilities rather than 160 as originally planned.
- Most facilities did not maintain updated stock records. Therefore, it was not possible to calculate average monthly consumption (AMC), months of stock (MOS) on hand, or frequency or duration of stockouts.
- Information on stockouts in the previous 6 months was captured through provider recall and could not be independently verified.
- Provincial coordinators accompanied enumerators to many of the facility visits as part of the assessment team. During interviews, providers might have responded in the affirmative to the enumerator questions even though they may not have provided the service in order to impress supervisors.
- As the assessment aimed to cover all facilities with the country, pilot testing prior to actual implementation could not be conducted.

3. Reproductive Health Services

The following section assesses the ability of health facilities within Vanuatu to offer and the capacity to provide reproductive health services including family planning (FP), antenatal and postnatal care, delivery, HIV and STI services, cervical cancer screening, adolescent and youth-friendly (AYF) services, and response to gender-based violence (GBV) through selected tracer items. These items include trained staff, availability of guidelines, job-aids, equipment, diagnostics as well as availability of necessary medicines and commodities. Though strongly related to supply chain management (see next section), information on expired commodities is included in this section due to the potential risk associated with use if provided during service.

The following sections provide results for the 159 facilities visited in Vanuatu and, when appropriate, identifies issues particular to facility levels.^{ix} Results are calculated to provide an overall situation of service provision, product and equipment availability within the country/facility level irrespective of policy (i.e., the RDP) in order to accurately reflect the current service environment. Table 1 below presents the breakdown of facility type, facility level and managing authority (i.e., public or private).

Tables with disaggregated results by provinces and by facility level are available on future request. For more information on the effects of Tropical Cyclone Harold, please see Annex 6.

Table 1: Facility Characteristics^x

	Primary level	Secondary level	Tertiary level	Total
Public facilities (N=135)				
Hospitals	0	4	2	6
Health Centres	0	36	0	36
Dispensaries	92	0	0	92
Clinics	1	0	0	1
Private facilities (N=24)				
Hospitals	0	0	0	0
Health Centres	0	3	0	3
Dispensaries	7	0	0	7
Clinics	12	1	1	14
Total	112	44	3	159

ix As noted in the limitation section, one facility was dropped from analysis due to inconsistent results. Therefore final denominator for all facilities is 159

x The classification of facility type and managing authority are based on the Ministry of Health's HMIS master facility list dated August 31, 2020. The classification of level is based on collected information from facility visits, triangulated with the RDP.

Service overview



96% of facilities provide **family planning services**



83% of facilities have **providers trained in family planning**



50% of facilities have **family planning guidelines**



65% out of the 112 primary level facilities provided **three or more** contraceptive methods



38% of facilities are **family planning service ready**

3.1. Family Planning

As mentioned above, according to the RDP, FP services are integrated throughout the health system although primary level facilities (dispensaries and HCs) are the main entry point for services. According to the 2018 EDL, short term methods (condoms, pills and injectables) should be available at all levels of the system, while short term and long term methods (condoms, pills including pre-packed emergency contraceptives (EC), injectables, and IUCD) should be available in HCs and hospitals. Only hospitals are expected to provide implants (i.e. Jadelle®) per the EDL/RDP.

Analysis of results show that nearly all (96% of 159) facilities provide some level of FP services. Of the 152 facilities providing FP services, 83% (126) have staff trained in modern FP methods. Those without trained providers include 21 dispensaries, four HCs, and one private clinic. Additionally, 41% (62) of these facilities have staff trained in implant insertions and removals and 34% (51) have staff trained in IUCD insertion and removal. When disaggregated by level, results indicate training gaps at facilities where these services are intended to be provided as well as trained providers in locations in contrary to the RDP. While all six hospitals have trained providers available for implant and IUCD insertion and removals 61% (23) of HCs, and 39% (5) of clinics have trained providers in implant insertion and removal while 58% (22) of HCs and 46% (6) of clinics have trained providers in IUCD insertion and removal. Additionally, 30% (28) of dispensaries have trained providers in implant insertion and removal while 18% (17) of dispensaries have trained providers in IUCD insertion and removal.

Availability of guidelines and job aids are limited. Family planning guidelines were reported as available in just under 50% (75) of the facilities while FP job aids were reported in 33% (49). Fewer, (42% and 28% of the 152 facilities providing FP services) were able to show enumerators copies of these guidelines and job aids for physical verification. Of the FP guidelines shown, 86% of the 64 copies were national guidelines. With the exception of eight copies, all the guidelines produced were dated 2010 or later.

As shown in Table 2, most facilities manage and are able to provide male condoms, female condoms, combined oral contraceptives, progestin-only pills and injectables on the day of the visit. Twenty four percent (36) of facilities reported managing EC (10 dispensaries, 15 HCs, 5 hospitals, and 6 clinics) although 69% (25) of these facilities had EC available on the day of visit.

Availability of long-term methods is limited. Forty-one percent (63) of facilities, including, 25% (24) dispensaries, 74% (28) HCs, 100% (6) hospitals, and 39% (5) clinics, offer implants, most of whom had pieces available on the day of the visit. Only 11% of facilities (including three dispensaries, six HCs, all six hospitals, and one clinic) reported offering IUCDs; 69% of these 16 facilities had usable IUCDs available on the day of visit.

When looked at as a whole, 68% (104) of the 152 facilities offering FP services were able to provide three or more methods of contraception on the day of visit, while only 5% (8) were able to provide at least five methods. When disaggregated by level, 67% of the 107 primary level facilities were able to provide three or more methods, while only 13% of the 46 secondary and tertiary level facilities were able to provide five or more methods on the day of the visit. When considering all 159 facilities, including the seven facilities that did not provide FP services, 65% of 112 primary level facilities (66% of dispensaries and 62% of clinics) were able to provide three or more methods. Only 13% of the 47 secondary and tertiary level facilities (8% of HCs, 50% of hospitals and 0% of private clinics) were able to provide five or more methods on the day of the visit.

Expired female condoms, injectables and EC were common, especially at HCs. Enumerators observed expired female condoms at 37% (11) of HCs and expired EC at 27% (4) of HCs. Expired injectables were found at 13 dispensaries and one hospital. Expired IUCDs were also common at facilities that managed the product; enumerators found expired pieces at two HCs and three hospitals.

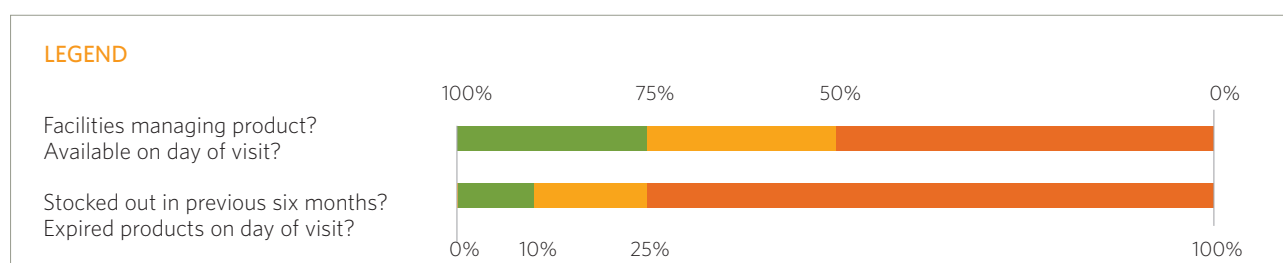
Table 2: Availability of Family Planning Products

	Facilities managing product	Available on day of visit?*	Stocked out in previous six months? (reported)**	Expired products on day of visit?		Facilities managing product	Available on day of visit?*	Stocked out in previous six months? (reported)**	Expired products on day of visit?
Male Condoms	96%	88%	6%	8%	Injectables	86%	89%	5%	13%
Female Condoms	67%	80%	9%	22%	Emergency contraception	24%	69%	18%	14%
Combined Oral Contraceptive	88%	86%	6%	8%	Implants	41%	78%	14%	8%
Progestin-Only Pills	82%	86%		9%	IUCDs	11%	69%	24%	31%

Note: in this table, all percentages except “Number of facilities managing” are based only on facilities “managing” the product. Management of product is defined as having it in stock within the previous 6 months

*Based on direct observation on day of visit

**Based on interviews. Unable to confirm due to lack of updated stock cards



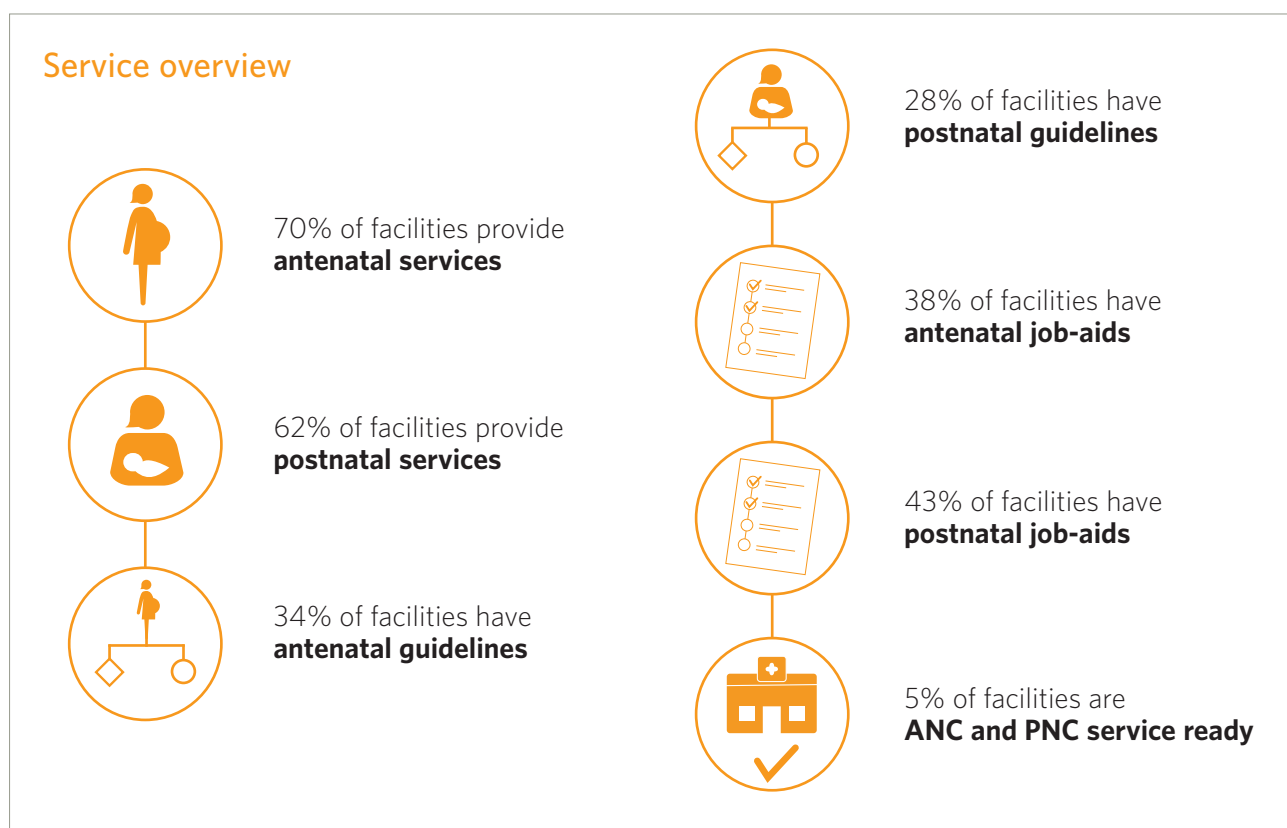
When combining all four domains (availability of services, availability of guidelines, availability of trained staff and availability of products)^{xi}, 38% of the 152 facilities providing FP services can be considered FP service ready. This includes 46% of clinics, 31% of dispensaries, 45% of HCs, and 100% of hospitals.

Enumerators also asked providers if they had ever substituted another contraceptive in place of EC, and if so, what they use. Of the 152 facilities providing FP services, 28% (44) reported that they have substituted other FP products for EC; of these, 40 have used another oral method, two have used another non-oral method, and one has substituted for either one depending on the situation.

3.2. Antenatal and Postnatal Care

As mentioned above, according to the 2018 RDP, ANC and PNC services are expected to be available at all levels of the health system. Results show that 70% of the 159 facilities in Vanuatu reported providing ANC, including all six hospitals, 90% of the 39 HCs, 63% of the 99 dispensaries and 54% of the 15 clinics. Sixty-two percent (98) of facilities also reported providing PNC services, including 56% (55) of dispensaries, 80% (31) of HCs, all six hospitals, and 40% (6) of clinics.

Out of those providing the services, only a few reported having any guidelines (34% [38] for ANC and 28% [27] for PNC), and fewer were able to produce these guidelines for the enumerators to verify (27% [30] for ANC and 24% [23] for PNC). Most of those that were verified were produced by MOH and issued around 2015 or later. Of note, very few hospitals were able to produce ANC and PNC guidelines for verification with just two hospitals for ANC and one for PNC. Job aids were slightly more available (38% [42] reported for ANC, 43% [42] reported for PNC), and able to be verified by enumerators verify (33% [37] for ANC, 38% [37] for PNC).



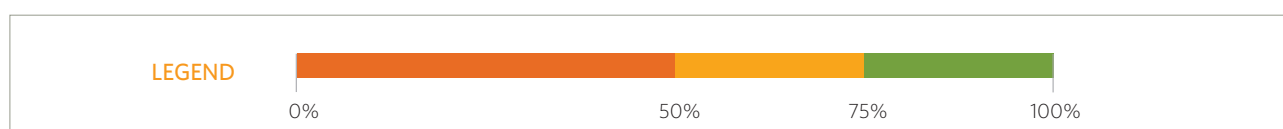
xi Training focuses on provision of modern contraceptive methods, not necessarily implant or IUD insertions. Products were limited to the most popular short term contraceptive-i.e. male condoms, COC and injectables

During ANC visits, providers are supposed to provide information to clients on a range of key topics to support health and wellbeing of mothers and infants during pregnancy, delivery and postpartum. As shown in Table 3, based on interviews with providers, more than 92% reported that they covered topics such as danger signs in pregnancy, birth preparedness, nutrition during pregnancy, infant feeding, family planning post-delivery, and personal hygiene practices during ANC visits. Fewer providers reported counselling pregnant women on safer sex practices (73%) and HIV and PMTCT (45%).

Table 3: Counselling Topics Covered during ANC

Covered during ANC		Covered during ANC	
Birth Preparedness	93%	Infant feeding practices	96%
Complication readiness	88%	Management of common discomfort in pregnancy	82%
Danger Signs in pregnancy	97%	Nutrition in pregnancy	97%
Family planning	96%	Personal hygiene and lifestyle modification	92%
HIV and PMTCT	45%	Safer Sex	73%

Based on interviews with providers in facilities that provide ANC services (n=111)



In addition to counselling during ANC visits, providers are expected to provide services, such as administering vitamins and vaccinations, and monitor pregnant women via various screenings and tests to ensure the health of the mother and foetus throughout the pregnancy. As Table 4 shows, providers reported that most facilities providing ANC services routinely provide prenatal vitamins, including iron and folic acid (96%) with fewer providing the tetanus toxoid vaccination (70%) and deworming pills (53%). A majority of providers at the facilities reported screening for various complications in pregnancy, including screening for hypertensive disorder (74%), gestational diabetes (70%), anaemia (59%) and STIs (76%) during ANC visits. Only 26% (29) reported screening for hepatitis and just 22% screen for HIV. Additionally, 59% (66) of facilities reported assessing for signs of gender-based violence (GBV) during ANC.

When asked about point of care (POC) testing, similar responses were provided (Table 5). Seventy-eight percent (86) of providers reported using POC testing for urine test, 69% reported POC blood glucose testing, and 66% reported POC pregnancy testing. Less than 30% of all facilities providing ANC services conduct POC testing for syphilis (30%), HIV (19%), Hepatitis (15%), and haemoglobin levels (12%).

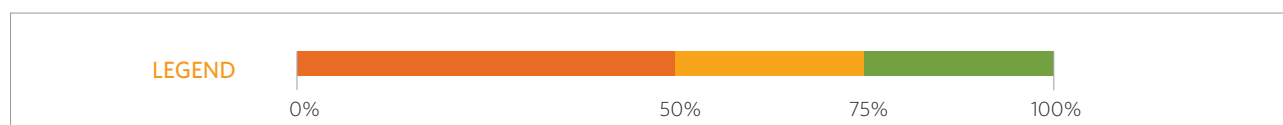
Table 4: Routine Services and Screenings provided during ANC

	Provided during ANC		Provided during ANC
Administers tetanus toxoids vaccination	70%	Screens for anaemia	59%
Give prenatal vitamins ^{xii}	96%	Screens for STIs	76%
Screens for Hypertensive disorder	74%	Screens for HIV	22%
Screens for Diabetes	70%	Screens for Hepatitis	26%
Assessed for signs of gender-based violence	59%	Administer deworming pills ^{xiii}	53%

Table 5: Point of Care testing provided during ANC

	Testing during ANC		Testing during ANC
Blood glucose	69%	Pregnancy test	66%
Hb (haemoglobin levels)	12%	Syphilis test	30%
Hepatitis test	15%	Urine test	78%
HIV test	19%		

Based on interviews with providers in facilities that provide ANC services (n=111)



Providers also offer a range of services during PNC visits to monitor the health of the mother and newborn. As Table 6 indicates, more than 77% of providers reported that their facilities offered key routine services, including counselling on key topics, monitoring of post-delivery complications and involution of the uterus, offering immunization services, and discussing family planning at six weeks. Fewer providers, however, reported regularly monitoring the healing of tears and scars (64%), screening for signs and symptoms of post-partum depression (55%), or GBV (48%), counselling on post-partum family planning (63%) or resumption of sexual activity post-partum (60%).

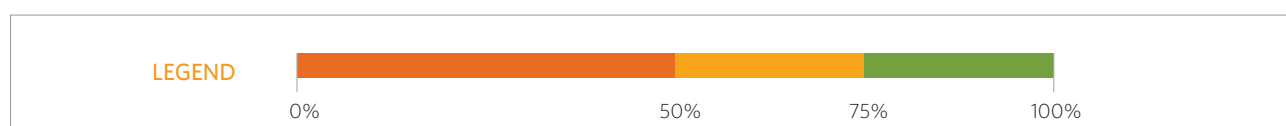
^{xii} Provision of prenatal vitamins included iron and folic acid

^{xiii} While recommended by the WHO, Vanuatu currently does not have a policy in place to screen and provide deworming pills to pregnant women during ANC visits.

Table 6: Routine Services Provided during PNC

	Provided during PNC		Provided during PNC
Counselling on maternal and newborn danger signs	86%	Immunization	78%
Counselling on infant feeding	92%	Management of PNC complications	77%
Counselling on maternal nutrition	88%	Monitoring healing of episiotomy or tears and C/S scar	64%
Counselling on resumption of sexual activity	60%	Monitoring involution of the uterus	83%
Family planning at 6 weeks	93%	Monitoring for signs or symptoms of GBV	48%
Immediate post-partum family planning	63%	Monitoring symptoms of post-partum depression	55%

Based on interviews with providers in facilities that provide PNC services (n=98)



Nine medicines and four consumables used in the diagnosis, prevention, and treatment of key maternal and neonatal morbidity and mortality causes, often needed during ANC and PNC visits, were assessed for both availability on the day of the visit and the presence of expired product. Many of these products, including antibiotics, anti-hypertensive medicines and corticosteroids, are considered vital during intrapartum care, as well as during ANC and PNC.

As shown in Table 7, most of the medicines, with the exception of corticosteroids, tetanus toxoid, and antihypertensives were available on the day of the visit based on enumerators' direct observations. Corticosteroids, which are expected at all facility levels per the 2018 EML, were available at 20% (3) of clinics, 40% (40) of dispensaries, 74% (29) of HCs and 100% (6) of hospitals. Similarly, tetanus toxoid, a vaccine expected to be at all dispensaries and above, was available at just 13% (2) of clinics, 34% (34) of dispensaries, 77% (30) of HCs and 100% (6) of hospitals. Although not widespread, expired medications were observed at several facilities, especially mebendazole which was found to be expired in 23% (36) of facilities.

Among consumables, glucose test strips and lancets were available in most facilities, while urine dipsticks and microcuvettes were more limited. In addition, expired glucose test strips were found in 10% of facilities while 11% of facilities had expired urine dipsticks. (See Table 20 below for availability of HIV and STI test kits.)

Table 7: Availability of Key Tracer Drugs and Consumables for ANC and PNC Services

	Available on day of visit?*	Expired products on day of visit?*		Available on day of visit?*	Expired products on day of visit?*
Medicines:					
Antibiotics	89%	3%	Antihypertensives	69%	6%
Folates or folic acid	83%	3%	Corticosteroids	49%	9%
Mebendazole	94%	23%	Iron tablets/ tonic	87%	4%
Tetanus toxoid	45%	0%	Metronidazole	79%	6%
Consumables:					
Glucose Test Strips	83%	10%	Lancets	77%	10%
Microcuvettes	62%	8%	Urine dipsticks	61%	11%

*Based on direct observation on day of the visit (n=159)

In addition to key medicines and consumables, 11 equipment items key to ANC and PNC services were assessed for availability and functionality on the day of the visit: an adult weighing scale, blood pressure apparatus, clock with timer (that belonged to the facility), Cusco's and Sims' speculums, glucometer, foetal stethoscope, haemoglobinmeter, reflex hammer, tape measure, and ultrasound machine. Equipment were considered available when observed in the facility and were considered functional if found in working condition and ready to use.

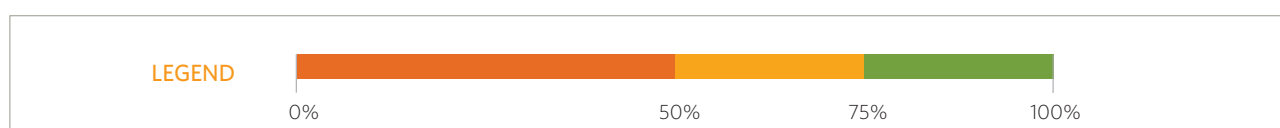
As shown in Table 8, most facilities had adult weighing scales, blood pressure apparatuses, and tape measures. However, availability of other common items like a clock with a timer, haemoglobinmeters, speculums, glucometers, foetal stethoscopes, and reflex hammers were limited. Only four of the six hospitals (67%), had a functional ultrasound machine available on the day of visit.^{xiv}

xiv In its 2016 antenatal care (ANC) recommendations for pregnant women, the World Health Organization (WHO) recommends one ultrasound (US) scan before 24 weeks gestations. While Vanuatu's ANC clinical guidelines have been updated to adopt this practice, there is currently no policy in place that delineate facility roles and necessary equipment to provide the expected service (e.g., US scan.) As part of the RMNACH Implementation Strategy of and Policy, procurement/ provision of particular emergency obstetric equipment including ultrasounds were listed as part of efforts for improving safe motherhood. According to the 2018 RDP, ultrasounds are expected to be available at all hospitals, although does not specify use for ANC.

Table 8: Availability of equipment for ANC and PNC Services

	Available on day of visit?*		Available on day of visit?*
Adult weighing scale	88%	Haemoglobinmeter	7%
Blood pressure apparatus	86%	Reflex hammer	14%
Clock with timer	32%	Sims' speculum	30%
Cusco's speculum	51%	Tape measure	82%
Glucometer	69%	Ultrasound machine	4%
Foetal stethoscope	57%		

Available, observed, and functioning on the day of the visit (n=159)



When combining the four domains (availability of services, guidelines, trained staff, products, and equipment), only 5% of the 159 facilities can be considered as ANC and PNC service ready. This includes two dispensaries (2%), three HCs (8%) and two hospitals (33%) and one private clinic (7%).

3.3. Safe Delivery Services



*see methodology section for definition

Under the current RDP, deliveries can take place at dispensaries, HCs, and hospitals with correct staffing. Eighty-eight of the 159 facilities (55%) reported providing routine delivery services, including all six hospitals, 29 HC (74%), 51 dispensaries (52%), and two clinics (13%), while an additional 3 dispensaries reported providing deliveries in emergencies (i.e., when a woman arrives in the later stages of labour). **The following results are based on these 88 facilities.**

Delivery guidelines and job-aids were limited at facilities providing delivery services. Only half of these facilities reported having delivery guidelines, with enumerators able to verify availability at 44% of

facilities. Similarly, only 35% of facilities providing delivery services had delivery job-aids, with enumerators able to verify job aids at 33% of these facilities.

Facilities were assessed for the presence of nine critical medicines used during delivery. Seven of these critical medicines were further assessed as to whether they were available specifically in the delivery room (or immediately nearby). As shown in Table 9, over 90% of facilities providing delivery services had antibiotics, oxytocin, and sodium lactate solution available in the facility on the day of the visit. Most facilities also had antihypertensives and magnesium sulphate available on the day of visit. The availability of other key delivery medicines, i.e., calcium gluconate (57%), corticosteroids (67%), and misoprostol (64%), were more limited at these facilities. Additionally 28% of facilities offering delivery services had ergometrine available on the day of the visit.

Availability of the medicine in the facility, however did not automatically translate to availability of essential delivery medicines in or nearby the delivery rooms. Only Oxytocin was widely available in the delivery room, present at 82% (72) of these facilities on the day of visit. Less than 50% of facilities had the other six key medicines (i.e., antibiotics, antihypertensives, calcium gluconate, corticosteroids, magnesium sulphate, and misoprostol) available in delivery rooms on the day of the visit (Table 10).

Data collectors also found multiple instances of expired product, particularly oxytocin, co-mingled with the usable product in both the facility as well as in the delivery rooms.

Table 9: Availability of Key Delivery Medicines on Day of Visit in the Facility

	Available on day of visit?*	Expired products on day of visit?*		Available on day of visit? *	Expired products on day of visit?*
Antibiotics	99%	3%	Misoprostol	64%	6%
Antihypertensives	85%	8%	Oxytocin	91%	19%
Calcium gluconate	57%	11%	Ergometrine	28%	2%
Corticosteroids	67%	11%	Sodium Lactate solution/infusion or normal saline	92%	2%
Magnesium Sulphate	76%	8%			

* Based on direct observation on day of the visit in facilities that provide delivery services (n=88)

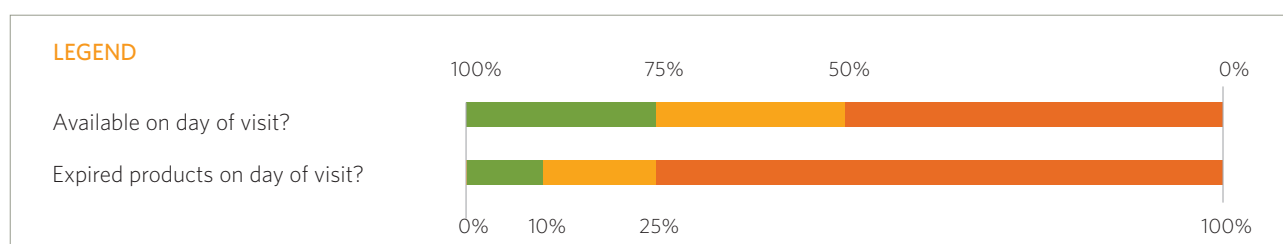
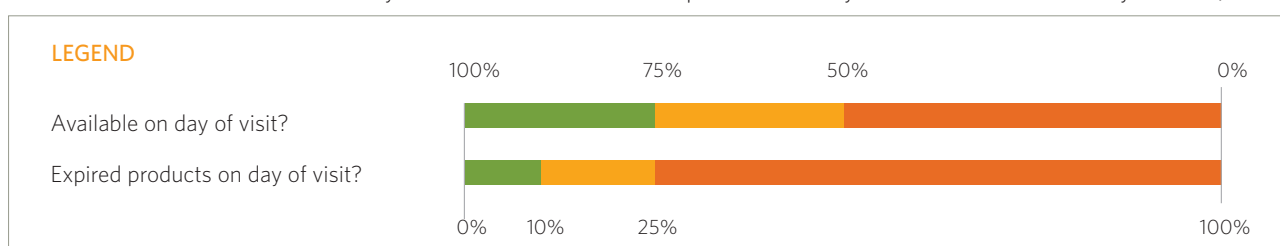


Table 10: Availability of Key Medicines in Delivery Rooms on Day of Visit

	Available in delivery room?*	Expired products in delivery room?*		Available in delivery room?*	Expired products in delivery room?*
Antibiotics	49%	5%	Misoprostol	44%	3%
Antihypertensives	41%	6%	Oxytocin	82%	26%
Calcium gluconate	42%	8%	Ergometrine	16%	2%
Corticosteroids	28%	2%	Sodium Lactate solution/infusion or normal saline	60%	9%
Magnesium Sulphate	43%	8%			

*Based on direct observation on day of the visit in facilities that provide delivery services and had delivery rooms (n=88)



As part of determining a facility's capacity to provide proper care for mothers and newborns immediately before, during and after delivery, 33 medical items/equipment were assessed for availability and functionality, when applicable. Items were considered available when observed in the facility and functional if found to be in working condition, sterile and ready for use. In other words, should a woman arrive at the facility in labour, the facility would have the necessary items available to deliver the baby safely and the provider(s) would be able to locate the equipment with relative ease. Individual facility level information on availability of functioning equipment can be found in Annex 7. Per the RDP, all of these equipment should be available at the dispensary level and higher.

As shown in Table 11 and 12, availability of functioning delivery equipment varied widely. More than 80% of facilities had blood pressure apparatuses, cord clamps, delivery beds, disposable latex gloves (sterile and non-sterile), scissors/blades for cutting cord, sutures and thermometers. Other equipment was more limited. Approximately 60% of facilities had amnio hooks, blank partographs, episiotomy scissors, and an infant scale. Additionally, less than 20% of facilities had manual vacuum aspirators or extractors, elbow-length sterile gloves, pulse oximeters, reflect hammers, or oxygen tanks. Similarly, very few facilities had the necessary neonatal resuscitation equipment available (Table 11).

When combined, only 30% (26) of facilities providing deliveries had all the essential equipment for mothers (i.e., partograph, sterile latex gloves, non-sterile latex gloves, thermometer, blood pressure equipment and foetal stethoscope). Only 7% (6) had all the essential equipment for newborn and neonates (i.e., mucus extractor/suction machine, size 0 and size 1 masks for neonatal resuscitation, oxygen tank, blade/scissors and cord clamp).

Table 11: Availability of Functioning Delivery Equipment

Observed and functioning		Observed and functioning		Observed and functioning	
Amnio hook	58%	Elbow-length sterile gloves	11%	Needle holder	78%
Adult bag and mask	40%	Episiotomy scissors	61%	Oxygen tank	18%
Blank partograph	59%	Examination light	21%	Pulse oximeter	19%
Blood pressure apparatus	91%	Foetal stethoscope	66%	Reflex Hammer	17%
Clock with timer	36%	Forceps**	39%	Scissors/blade for cutting cord	81%
Cord clamp	96%	Infant scale	61%	Suture material with needle	89%
Delivery bed	86%	Manual vacuum aspirator	19%	Thermometer	85%
Disposable non-sterile latex gloves	96%	Manual vacuum extractor**	13%	Towel for drying newborn	38%
Disposable sterile latex gloves	81%				

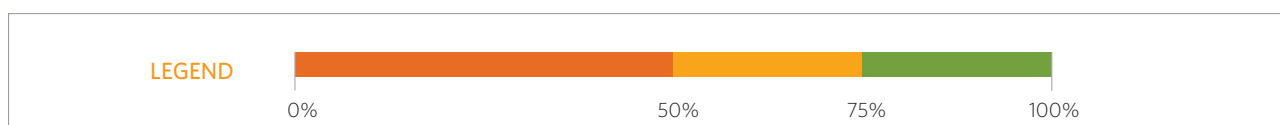
Table 12: Availability of Functioning Neonatal Resuscitation Equipment*

Observed and functioning		Observed and functioning		Observed and functioning	
Single-use Suction bulb^	18%	Multi Use- Suction bulb^	5%	Resuscitation table	26%
Incubator	3%	Newborn bag and mask (size 1)	59%	Newborn bag and mask (size 0)	38%
Newborn Suction catheter	41%	Electric suction pump^	5%		

*Based on direct observation on day of the visit in facilities that provide delivery services (n=88)

**manual vacuum extractor and forceps are interchangeable

^ Single/multi ^ use bulbs and electric suction pump are interchangeable



Facility managers were asked during interviews about their EmONC referral practices. Twenty-four percent (21) of the 88 facilities offering delivery services were able to show enumerators copies of EmONC referral guidelines while an additional 6% (5) said they had the guidelines but were unable to produce them when asked. Facility managers were also asked who was the managing authority for EmONC referrals from this facility to another facility, 54% (44) reported it was on the facility's own authority (including the two referral hospitals, VCH and NPH) while 46% (38) reported that a higher level facility was the governing authority.

3.4. Labour and Birth Practices

During interviews, enumerators asked providers to describe their delivery practices during the second and third stages of labour (i.e. leading up to delivery of the baby and placenta). As shown in Table 13, most providers reported providing uterotonics (e.g. Oxytocin) within one minute of delivery. These findings are consistent with the direct observations of oxytocin available in the delivery rooms presented above in Tables 9 and 10. Most (92%) providers also reported routine practices consistent with active management of third stage of labour (AMTSL). However, it is unclear whether this is done consistently, as the same providers also reported waiting for signs that the placenta has separated and delivered spontaneously (i.e. passive management.)

Table 13: Provider Practices during Labour and Delivery*

Practices provided		Practices provided	
Uses partograph for Monitoring Women	58%	Placenta delivered	97%
Uterotonics given within one minute after delivery	94%	Fundal massage applied	96%
Controlled cord traction applied	94%	Wait for signs that placenta has separated and deliver spontaneously	97%

Enumerators also asked providers to describe post-delivery practices provided to mothers and newborns immediately after birth and within specified timeframes. As shown in Tables 14 and 15 below, most providers reported correct behaviour and practices for caring for new mothers and newborns.

Table 14: Practices provided to the mother following delivery*

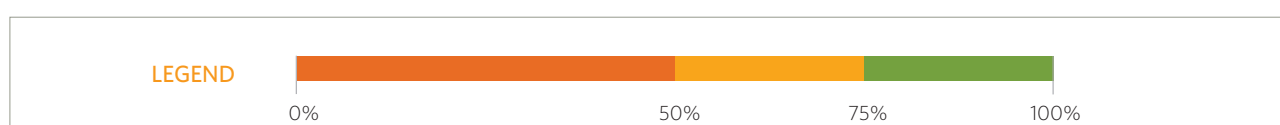
	Within 1 hour	Within 3 days		Within 1 hour	Within 3 days
Assessment of vaginal bleeding	99%	93%	Blood pressure monitoring	97%	92%
Assessment of uterine contraction	90%	85%	Urine void documentation	60%	52%
Assessment of fundal height	83%	81%	Offer post-partum FP	42%	59%
Check temperature and pulse	93%	89%			

Table 15: Practices for Baby Care Following Delivery*

	Within 1 hour		Within 1 hour
Skin-to-skin contact	98%	Vitamin K	87%
Initiation of breastfeeding	96%	BCG* immunization	64%
Resuscitation of newborn	80%	Hepatitis B* immunization	75%
Eye care	83%		

*As reported by provider at facilities that provide delivery services (n=88)

Note: Although frequently practiced, BCG and Hepatitis B immunization are not required within 1 hour, but should be given before discharge from hospital.



3.5. Routine Delivery Services

A facility's ability to provide routine safe deliveries is examined through two different, yet similar, composite indicators. The first "readiness to provide delivery services" focuses on whether the facility has the necessary resources, in terms of appropriate staff, guidelines, equipment and medication, to provide routine vaginal and assisted deliveries.^{xv} As described in the methodology section, components for this indicator are drawn from direct observations. The second indicator, "safe delivery practices" captures the facility's standards of care leading up to, during and after delivery for mothers and newborns. While the majority of information on the providers' routines is obtained through interviews with providers, direct observations (i.e., availability of vital equipment and medication located in the delivery room) is included as means to verify reported practices.

Based on analysis, none of the 88 facilities providing delivery services meet the criteria to be considered "ready to provide delivery services" for routine vaginal or assisted deliveries. As shown in Table 16, there were gaps across all components, including a lack of availability of guidelines, key medicines and equipment, and trained staff for assisted delivery. The main gaps for key medicine and equipment were the lack of available and functioning equipment such as exam lights, sim speculum, pulse oximeters, towels, and resuscitation masks for newborns, and the lack of availability of calcium gluconate. Most notable is that none of the 88 facilities had the required equipment needed to perform routine vaginal or assisted deliveries.

Table 16: Components for Readiness to Provide Delivery Services Composite Indicator

	Routine Delivery	Assisted Delivery		Routine Delivery	Assisted Delivery
Appropriate cadre of staff	96%	44%	Availability of all five medicines	44%	
Availability of guidelines	44%		Availability of required equipment	0%	0%

See page 7 for inclusion criteria for each component. See Tables 9-15 above for availability of individual medicines and equipment

When analysed for "safe delivery practices", one of the 88 facilities providing delivery services meet the criteria—Silimaui Health Centre in Shefa Province. As shown in Table 16, gaps exist in the provider practices before and after birth for both mothers and newborns. There are also significant issues with labour and delivery practices. Although most providers reported practicing AMTSL, only 8% (2) of facilities had all the necessary medicine and 23% had the necessary equipment in the delivery room to provide appropriate care.

Table 17: Components for Safe Delivery Composite Indicator and Labour and Delivery Disaggregation

Safe Delivery		Labour and Delivery Components	
Counselling on danger signs during ANC and PNC	81%	Use of partography	58%
Labour and Delivery	6%	Practice AMTSL	92%
Care for Mother after birth	46%	Has neonatal equipment in delivery room	8%
Early Essential Newborn Care	48%	Has essential medicine in delivery room ^{xvi}	23%

See page 7 for inclusion criteria for each component. See Table 9-15 above for individual practices and availability of individual medicines and equipment

^{xv} Assisted vaginal delivery is defined as vaginal birth of a baby performed with the help of forceps or a vacuum device.

^{xvi} When calcium gluconate is excluded from analysis, 65% of facilities had all the other medicine available in the delivery room.

3.6. Emergency Obstetric and Newborn Care

The *Safe Motherhood* community (WHO/UNICEF/UNFPA/AMDD) has set a global benchmark on the availability of EmONC facilities to one comprehensive EmONC (CEmONC) and four basic EmONC (BEmONC) facilities per 500,000 population. During the facility visit enumerators asked midwives/nurses in the delivery unit whether the facility provided nine specific services related to EmONC. Direct observation of certain medicines and equipment were used to confirm that the service could be provided that day. See methodology section for further definitions and criteria. According to Vanuatu's RDP, regional and national hospitals (three of the six hospitals) are expected to provide CEmONC services, while health centres and provincial hospitals are expected to be able to provide BEmONC services.

Forty-four percent (39) of the 88 facilities report having staff trained to provide EmONC services, including one of the two clinics offering delivery services, 22% of dispensaries, 72% of HCs, and 100% of hospitals. EmONC guidelines were available at only 30% of these facilities while job-aids were only available at 18%. Four of the six hospitals had verified EmONC guidelines and three had verified job-aids. Less than 40% of health centres had EmONC guidelines and only 20% had job-aids available.

Analysis revealed that two of the 88 facilities providing delivery services met the criteria of providing both BEmONC and CEmONC service on the day of the visit—Lolowai Hospital in Penama Province and Wings of Hope Clinic in Torba Province.^{xvii} With a total population of approximately 300,000, Vanuatu does not meet the global benchmark. (Vanuatu does not meet its own EmONC targets set in the RDP.)

As presented in Table 18, gaps exist in each of the EmONC signal functions. These gaps are also consistent with findings in Table 10 and the availability of equipment.

Table 18: Signal Functions of EmONC Services

		Available/ Provided at Facility			Available/ Provided at Facility
BEmONC	Instrumental deliveries	18%	Removal of retained products of conception		24%
	Perform basic neonatal resuscitation with bag and mask	38%	Administer parenteral antibiotics		31%
	Manual removal of placenta	44%	Administration of uterotonic drugs for prevention and treatment of post-partum haemorrhage		44%
	Treatment of Eclampsia/ Pre-Eclampsia ^{xviii}	27%			
CEmONC	Emergency Blood Transfusion	8%	Caesarean Section		6%

*As reported by providers in facilities that provide delivery services (n=88)

^{xvii} There were noted gaps in the provision of BEmONC and CEmONC services at the two referral hospitals. For NPH, there were issues in the availability of available newborn resuscitation masks (size 0). At VCH, it was reported that the hospital does not offer instrumental deliveries or the manual removal of the placenta, although the provider may have misinterpreted the question given that VCH provides all other complex delivery services.

^{xviii} Twenty-four facilities (27%) reported providing services for the treatment of Eclampsia/ Pre-Eclampsia, though just 13 (15%) had the medicines for treatment available in the delivery room

3.7. Cervical Cancer

Cervical cancer is the third most frequent cancer in women globally with an estimated 570,000 new cases in 2018 representing 6.6% of all female cancers. It is estimated that the high mortality rate from cervical cancer globally can be reduced by 52% through early detection and effective screening and treatment programmes.¹¹ Global recommendations now include integrating screening into all SRH visits. As of 2018, Vanuatu's incidence rate of 17.0 per 100,000 women and a mortality rate of 10.6 per 100,000 women for cervical cancer was slightly lower than the regional average.¹¹ However, as screening is very limited it is likely that actual rates are higher.

According to the RDP, cancer care services, including treatment of cervical cancer, are available only at the hospital level. Twelve percent (19) of facilities (1% (1) of dispensaries, 18% (7) of HCs, 40% (6) of private clinics and 83% (5) of hospitals) reported providing secondary prevention of cervical cancer services. Among the 19 facilities providing services, most (84%) facilities had staff trained in secondary prevention of cervical cancer in the previous five years. Over 50% of these facilities reported that the training topics included diagnosis of cancer and referral for further treatment and conventional pap smears. Less than 30% of these facilities reported training that included visual inspection with acetic acid (VIA), liquid based cytology, or treatment for precancerous lesions.



12% of facilities
**provide secondary
prevention of
cervical cancer**

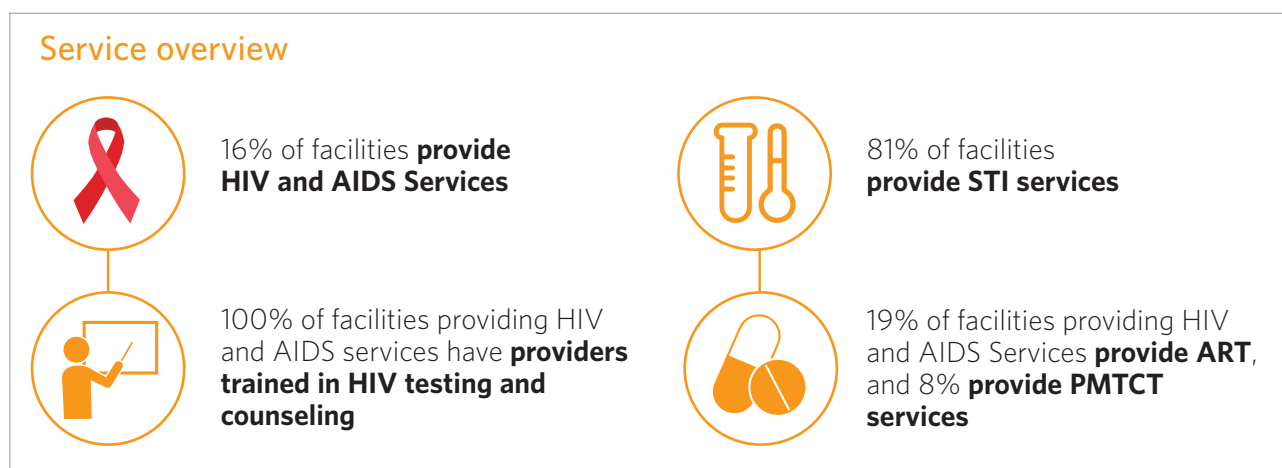
Availability of cervical cancer screening guidelines and job aids were limited. Enumerators were only able to verify screening guidelines at five of the 19 facilities and job aids/checklists at four of the 19 facilities providing cervical cancer prevention services.

Of the 19 facilities providing services, 14 (74%) reported providing pap smears while six (32%) provided VIA. Three facilities (one private clinic and two public HCs) reported providing the HPV vaccine and four reported providing HPV laboratory tests and HPV POC testing. Ten facilities reported providing referrals for treatment, while six facilities reported providing either cone biopsy, large loop excision of the transformation zone (LEETZ), and/or cryotherapy.

When considering the basic requirements for service readiness (availability of services for secondary prevention of cervical cancer and availability of guidelines), 21% (4) of facilities (Lenakel, Novo Medical Centre, NPH, and Qaet Vaes) that provide cervical cancer screening services can be considered cervical cancer prevention service ready.

Based on record review at facilities, 1,096 women were screened for cervical cancer at facilities in the previous six months, with nearly 80% taking place at facilities located on Malampa and Shefa provinces. Approximately 5% the women screened were detected as positive, 3% were treated for pre-malignant lesions of the cervix and 5% were referred for suspected cervical cancer.

3.8. Sexual Transmitted Infections, including HIV, Services



As mentioned earlier, screening of HIV and other STIs should be included as part of the ANC package and treatment available at all levels, according to the 2018 RDP. Functionally, however, this service has been integrated primarily only at the HC level and higher and at some private clinics. Based on interviews with the facility in-charges, 16% (26) of facilities reported providing HIV and AIDS services, including 83% (5) of hospitals, 18% (7) of HCs, 7% (7) of dispensaries, and 47% (7) of private clinics.

Of the 26 facilities that reported providing services, 19% (5) also reported offering antiretroviral treatment (ART) or ART related follow-up services and 8% (2) offer prevention of mother-to-child transmission (PMTCT) services to pregnant women. Forty-six percent of these facilities provided HIV counselling in spaces that enumerators confirmed provided both auditory and visual privacy; 12% (3) of the facilities offered counselling in rooms that provided neither type of privacy.

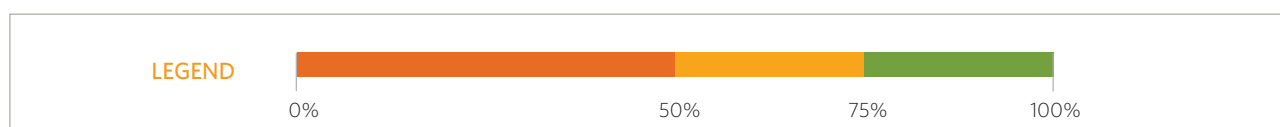
All facilities offering HIV and AIDS services reported having staff trained in providing HIV testing and counselling while only 9% (5) of the 26 facilities have staff trained in providing ART services and 8% (2) have staff trained in providing PMTCT services.

Facilities offering HIV services were further assessed on the services they provide to clients who are HIV positive. As shown in Table 19, approximately 30% or fewer of the 26 facilities providing HIV and AIDs services are providing additional services to clients who are HIV positive. When disaggregated by level, only one hospital (Lenakel) is providing many of these services.

Table 19: Services for HIV/AIDS clients

Provides service		Provides service	
Treatment for opportunistic infections	4%	Palliative care	8%
Systemic intravenous treatment for fungal infections	8%	Treatment for Kaposi's Sarcoma	4%
Nutritional rehabilitation	12%	Fortified protein supplementation	8%
Care for paediatric HIV/AIDS patients	12%	Preventative treatment for TB	12%
Primary preventative treatment for opportunistic infections	8%	Micronutrient supplementation	12%
FP counselling for HIV affected clients	23%	Condoms to prevent transmission of HIV	31%
ART treatment follow-up services, including providing community-based services	15%		

*As reported by the facility in-charge in facilities that provide HIV services (n=26)

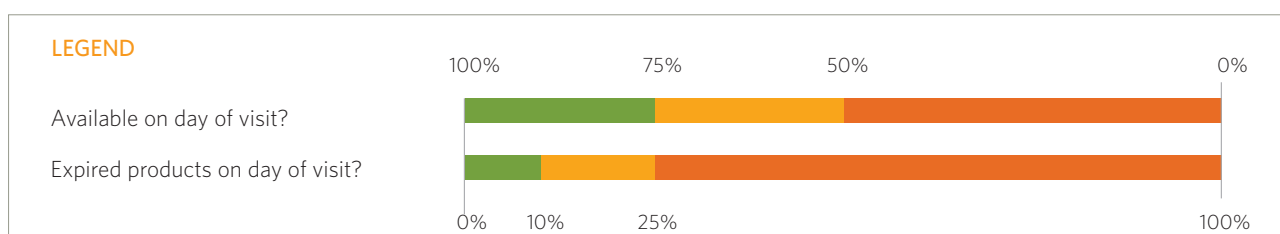


In line with the limited availability of HIV and STI services, as shown in Table 20, and consistent with findings in Table 5, availability of HIV test kits and syphilis test kits were limited at facilities. Only 14% (22) and 29% (45) of all facilities had rapid tests available for HIV and syphilis, respectively, in the facility on the day of the visit. Additionally, only 14% (22) of facilities had the combined HIV and syphilis test available on the day of the visit. Enumerators found 6% (9) of facilities had expired HIV test kits, 11% (17) with expired syphilis test kits, and 4% (6) with expired combined HIV and syphilis test kits on the day of their facility visit.

Table 20: Availability of Tracer Products for HIV and STI services

	Available on day of visit?*	Expired products on day of visit?*
HIV Test kit	14%	6%
Syphilis test kit	28%	11%
Combined HIV and syphilis test kit	14%	4%

*Based on direct observation on day of visit



In addition to HIV services, 81% of facilities provide other STI testing and treatment, primarily for gonorrhoea (70%) and chlamydia (58%).

When combining the four domains (availability of services, guidelines, trained staff, products and equipment), 46% (12) of the 26 facilities that provide HIV services can be considered STI, including HIV, service ready.

3.9. Adolescent and Youth-Friendly Services

Vanuatu's RMNCAH Policy and Implementation Strategy 2017-2020 lists "Improved sexual and reproductive health of adolescents and young people in Vanuatu through reduction of teenage pregnancy and STI cases, and strengthened HIV prevention" as Key Policy Area 4 although the RDP states that youth friendly services should be available at all hospitals. Ensuring that facilities provide AYF services is also an important component of the UNFPA's Sub-regional Programme (2018-2022), including the DFAT supported "Transformative Agenda" and "strengthening access to quality integrated SRH services."

Aspects of an AYF environment in facilities can include availability of information, education, and communication (IEC) materials specifically developed for adolescents and youth, policies and procedures to ensure privacy and confidentiality, health care providers with competencies and support to provide AYF services and information, non-judgmental staff, and hours of operation conducive to adolescent and youth. Although the HFRSA was not designed specifically to assess availability and quality of health care services for adolescents and youth, as defined by international standards, key components were included. Specifically:

- Pregnancy prevention and counselling services
- EmONC, antenatal and postnatal care and management of uncomplicated pregnancies for all pregnant women and girls
- Availability of STI (including HIV) prevention, screening, and management services
- Availability of staff trained in provision of adolescent and youth-friendly health services
- Availability of guidelines for provision of adolescent and youth-friendly health services
- Availability of counselling room (ideally with auditory privacy)
- Availability of adolescents and youth-friendly IEC materials
- Free or subsidized services
- Dedicated and/or flexible hours of operation (including weekends)

The first three components have been previously discussed above under family planning, ANC and PNC, and delivery services. This section, therefore, focuses on results for the remaining six components.

Fifty-eight percent (92) of all facilities reported offering AYF services, of which 49% (45) require consent from an adult for adolescents to receive SRH services. Twenty-one percent of the facilities have a dedicated room/space for adolescent SRH services of which 42% (8) offer both visual and auditory privacy.



**No facilities provide
AYF services per
global standards**

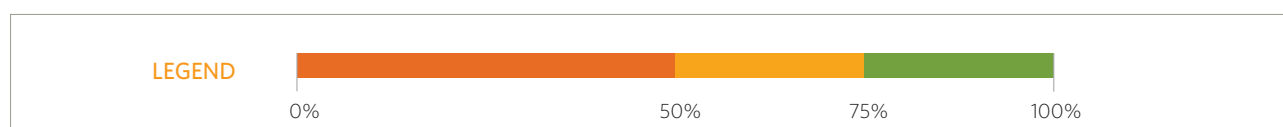
Sixty-one percent of the 92 facilities reported having at least one staff member trained in adolescent and youth SRH services. When disaggregated by level, 62% of dispensaries, 44% of HCs, 83% of hospitals, and 83% of private clinics have trained staff. Only 9% of facilities had guidelines on providing AYF services available on the day of visit, and 7% had AYF IEC materials. Sixty percent of facilities had flexible hours of operation that included weekends.

As AYF services are encouraged to be available at all health facilities, Table 21 provides the current situation with the individual components across all facilities in Vanuatu regardless of whether facility reported providing AYF services.

Table 21: Availability of Adolescent and Youth-Friendly Services in all Facilities

	Service offered		Service offered
AYF services provided	58%	AYF guidelines available	5%
Staff trained in adolescent and youth SRH services	35%	Dedicated room for AYF services available	12%
AYF services free or subsidized	28%	AYF IEC materials available	17%
Facility with flexible hours including weekends	60%		

*As reported by the facility in-charge and by observation in facilities that provide AYF services (n=159)

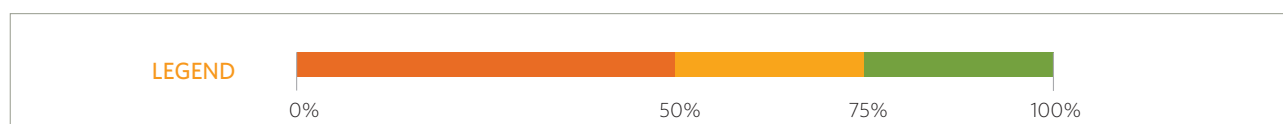


Additional information regarding individual services for AYF provided at the facility was gathered from facility in-charges at each of the 92 facilities providing AYF services. As shown in Table 22, FP and STI counselling are provided at most facilities, while services such HIV testing or the provision of contraception (short-term, LARCs or EC) are available at less than 40% of the facilities. GBV services are also limited (39%) at facilities providing AYF services.

Table 22: Availability of Individual Services for Adolescents and Youth in AYF-providing Facilities

	Service offered		Service offered
HIV testing and counselling for adolescents and youth	16%	STI treatment and counselling for adolescents and youth	86%
FP counselling for adolescents and youth	84%	Emergency contraceptives for adolescents and youth	35%
Condoms for adolescents and youth	96%	Short-term contraceptives for adolescents and youth	39%
LARCs for adolescents and youth	26%	GBV services for adolescents and youth	39%

*As reported by the facility in-charge in facilities that provide AYF services (n=92)



When examining the individual components, clear gaps in services are evident, such that no facilities in Vanuatu are providing AYF services according to global standards.

3.10. Gender-Based Violence Services



54% of facilities report providing **services for GBV**

As mentioned above, 60% of women in Vanuatu reported to have suffered from physical and/or sexual violence from their intimate partner and 48% of women reported physical and/or sexual assault by someone other than their intimate partner, according to a study conducted in 2011.¹⁸ Rates of violence against women and girls in the Pacific Islands are among the highest in the world. In an effort to reduce rates, the government, donors and civil society have focused on strengthening health services and referral pathways of services for survivors of violence through the development of clinical guidelines, training health workers at all levels to recognize and implement identification, treatment and referral protocols.²⁹

According to the RDP, enhanced HCs and higher level facilities are expected to provide GBV care. According to interviews with facility-in-chargers, GBV services were provided in 54% of the 159 facilities, including 73% (11) of private clinics, 42% (42) of dispensaries, 69% (27) of HCs, and 83% (5) of hospitals. However only 22% (35) of facilities have staff specifically trained in this area, including 53% (8) of clinics, 11% (11) of dispensaries, 28% (11) of HCs, and 83% (5) of hospitals. At facilities that provide GBV services, most reported offering services such as physical trauma assessment, psychological first aid, STI treatment and referrals to police and hospitals (Tables 23 and 24). However, few reported providing emergency contraceptives (35%), vaccines (tetanus toxoid, 32% and hepatitis, 12%) or post-exposure prophylaxis (21%).^{xix} Additionally, only 42% (36) of facilities reported that they collect forensic evidence. When disaggregated by level, this includes 29% of dispensaries, 56% of HCs, 80% of hospitals, and 46% of private clinics. Of the 36 facilities that collect evidence, about 45% provide vaginal swabs and/or picture evidence. Less than one-third of these facilities provide rape kits, pictograms/special reports for GBV evidence or bags/kits to store the evidence.

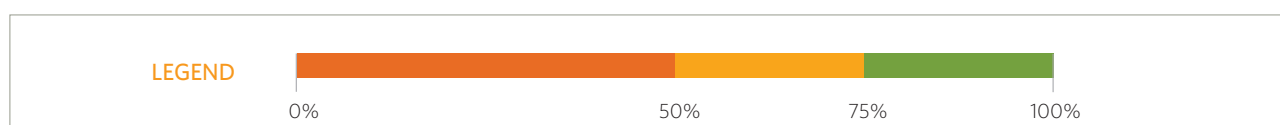
Table 23: Services provided for survivors of GBV

Emergency contraceptives	35%	Post-exposure prophylaxis	21%
Forensic Evidence Collection	42%	Psychological first aid / counselling	65%
Hepatitis vaccine	12%	STI treatment	67%
Physical trauma assessment	71%	Tetanus toxoid vaccine	32%

Table 24: Referrals provided for survivors of GBV

Police	71%	Financial aid	4%
Social services	23%	Legal aid	8%
Safe spaces/shelter	14%	Hospital care	64%
Psychosocial support	27%		

*As reported by the facility in-charge in facilities that provide GBV services (n=85)



xix Availability of PEP on day of visit was not included as part of the assessment so actual provision might be lower. 69% of facilities had emergency contraceptives available on day of visit (Table 2)

Availability of job-aids for GBV was limited among those facilities offering this service. Only 7% (6) of facilities had job-aids available with just 6% (5) verified by enumerators. Only 22% (19) of facilities have a private counselling room or space for providing GBV services, of which 74% offer both auditory and visual privacy. Overall, when combining the four domains (availability of services, job aids, trained staff, PEP provision, and availability of a dedicated room with auditory privacy), none of the 159 facilities are considered GBV service ready.

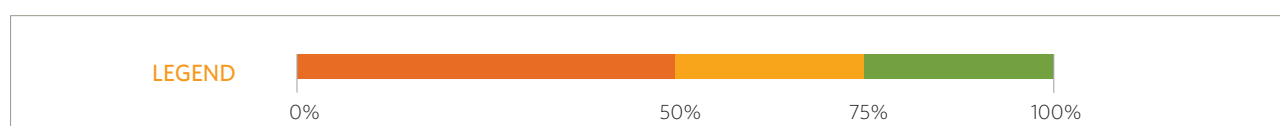
3.11. Integrated Sexual and Reproductive Health Services

Vanuatu RMNCAH related policies promote a minimum package of essential RH services which include FP, safe motherhood, prevention and treatment of HIV and STIs, adolescent RH, sexual violence, and cervical cancer screening. These policies are in line with the 2018 Guttmacher-Lancet Commission, which released a comprehensive SRH definition and essential package of SRH interventions that included FP services, maternal and newborn care, and prevention and treatment of HIV/AIDS; care for STIs other than HIV; post-miscarriage service; prevention, detection, and counselling for gender based violence; prevention, detection, and treatment of cervical cancer. The commission stressed that adolescents should have access to SRH information and services regardless of age or marital status and that countries adopt practices that enable health care providers at facilities offering contraceptives to provide integrated comprehensive counselling—i.e., contraceptive methods, STIs, HIV, cancers, pregnancy, and delivery.³⁰

Within this framework, the assessment reviewed the current status of integrated maternal health services in Vanuatu (i.e., whether facilities are offering: FP, ANC, PNC, delivery, and post -miscarriage services). Analysis revealed that 21 (13%) of the 159 facilities in Vanuatu provided the five services. When disaggregated by level, one of 15 clinics, seven (7%) dispensaries, eight (21%) HCs, and five (83%) of six hospitals offer integrated maternal health services. When HIV/STI, cervical cancer, AYF, and GBV services were included to reflect integrated SRH, only three (2%) of the facilities meet these criteria (one HC—Utas Health Centre—and two hospitals—Lenakel and Norsup hospitals)^{xx}.

Table 25: Summary of Integrated Sexual and Reproductive Health Services Provided at Facilities

Provides removal of retained products of conception	14%	Provides cervical cancer screening	12%
Provides delivery services	55%	Provides adolescent and youth-friendly services	58%
Provides HIV/STI services	17%	Provides antenatal care	70%
Provides postnatal services	62%	Provides FP services	96%
Provides GBV services	54%		



xx The two referral hospitals are not listed because they have gaps in reported services. Vila Central Hospital reported that it does not provide HIV services and Northern Province Hospital reported that it does not provide GBV services.

3.12. Services for Clients with Disabilities



Less than 15%
of facilities **have**
structural provisions
to aid accessibility
for people with
disabilities

According to Vanuatu's National Disability Inclusive Development Policy 2018 -2025 between 5-12% of the population has a disability. The policy connects itself to the NSPD including Objective Society 3.1 *"Ensure that the population of Vanuatu has equitable access to affordable, equality health care through the fair distribution of facilities that are suitably resourced and equipped."* The policy's implementation plan includes "mainstreaming of the rights of persons with disabilities in all policies, plans and programmes across the health sector."³¹

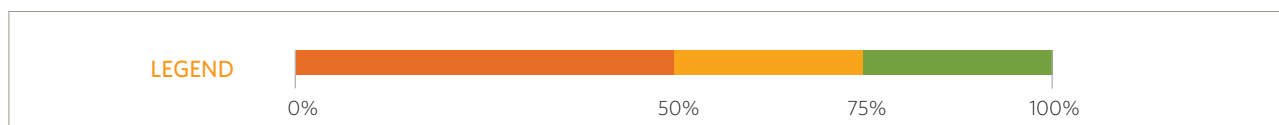
Through observation, enumerators assessed facilities for the presences of structural provisions to ensure accessibility by people with disabilities (Table 26). Less than 15% (24) of facilities had provisions, including a ramp for wheelchair access, examination rooms or bathrooms with wheelchair access, adjustable examination beds, and/or interior and/or exterior pathways marked for easy navigation. Similarly, adapted (e.g., braille, larger print, contrasting colours, digitized, etc.) IEC material, intake forms and other information were available in less than 4% of facilities. Just 12% (19) of facilities provide sign language interpretation for people who are deaf or hard of hearing.

Most facilities do not have the training or guidance to provide services to people with disabilities. Fifteen percent of facilities have providers trained about how to serve persons with disabilities. Only 3% (5) of facilities have guidelines or job-aids regarding service provision for those with disabilities.

In terms of service requirements and support, 39% (62) of facilities require consent from a caretaker in order to provide SRH services. Twenty-three percent (36) of facilities provide links to local disability organizations and provide assistive devices (e.g., hearing aids, wheelchairs, crutches, prosthetics, etc.) to patients.

Table 26: Summary of Structural Access at Facilities

Ramp for wheelchair access	15%	Interior/Exterior pathways for easy navigation	5%
Examination room with wheelchair access	12%	Public bathroom with wheelchair accessibility	11%
Adjustable examination bed	11%		



4. Commodity Management and Health Management Information Systems

This section focuses on findings related to commodity management and health management information systems (HMIS), specifically the use of current HMIS reports and records (including stock cards), expiries, training, and supportive supervision. Stock keeping records is a fundamental part of any supply chain, providing decision makers with essential data on stock levels within the system. Unavailable or outdated stock records represent gaps in a logistics system because current information is not available for stock management. The existence of expired stock at health facilities can be indicative of a number of problems within the health commodities supply chain. For example, a lack of records that leads to inaccurate needs forecasts can result in an overstock of products, resulting in expiries even when the product is being used regularly. Disorganized storage spaces can result in a facility misplacing stock or using new stock while old stock slips toward its expiration date, resulting in sudden stockouts when all the new stock has been used and all the old stock expires. Communication and transportation problems can lead to stock sitting in warehouses and expiring, even while community level facilities are stocked out.

A critical part of the provision of quality services is well-trained personnel who are regularly and suitably supervised. This helps to ensure not only the quality of care given by health personnel to clients but also that the systems, including the flow of commodities from one level to another, are functioning properly. Supervision is therefore discussed in this section on logistics management.

Service overview



40% of facilities have **guidelines for HMIS reporting**



75% of facilities use **current HMIS tools for data collection and reporting**



43% of facilities have **staff trained in logistics management for health supplies**



50% of facilities have **received FP supervision visits in the previous 6 months**

The assessment found that HMIS guidelines, which include reporting of services and products, were available in 45% (69) facilities, with enumerators able to verify copies in 40% (64). Most facilities reported having recent copies of HMIS tools, with 75% (119) able to produce them for the enumerators. Enumerators were also able to confirm that the majority of facilities (78%) sent reports to higher levels according to expected policy.

According to the facility in-charge, 43% out of the 159 facilities had staff trained in logistics management for health supplies, and this includes 87% (13) of private clinics, 34% (34) of dispensaries, 39% (15) of HCs, and 100% (6) of hospitals. When broken down by subject area, however, more staff had been trained in certain components. Facility in-charges from 47% (75) of facilities reported having staff trained in assessing stock, including knowledge of minimum and maximum stock balances, while 56% (89) reported having staff trained in making requests or ordering for restocking. Fifty percent (79) reported having staff trained in recordkeeping and 48% (76) reported having staff trained in proper health product storage practices. When disaggregated by level, staff trained were predominately located in private clinics and hospitals, and to a far lesser extent at HCs and dispensaries.

Facilities were also asked about the last time they had received supervision visits for the family planning and maternal health programmes. Approximately, 83% of facilities were able to provide information on when their most recent FP and/or maternal health (MH) supervision had been. More than 40% (69) of the facilities reported that it had been more than six months since they last received an MH supervision visit, including 60% (9) of private clinics, 43% (43) of dispensaries, 36% (14) of HCs, and 50% (3) of hospitals. Similarly, 34% (54) of facilities reporting it has been more than six months since they received an FP supervision visit, including 53% (8) of private clinics, 35% (35) of dispensaries, 23% (9) of HCs, and 33% (2) of hospitals. Eleven percent (17) of facilities reported receiving a FP supervision visit within the previous 30 days, while 8% (13) had received a MH supervision visit in the previous 30 days.

When asked about what topics the supervision visits covered within the past six months, 23% of facilities reported that the visit included a review of staff clinical practices, 16% reported it included observations of drug stock outs and expiry, 8% reported it included staff availability training, 17% reported it included review of guidelines or job aids, and 11% reported it had included data completeness, quality, and reporting.

Significant gaps were found in the stock keeping records for family planning products. As shown in Table 27, few facilities maintained any stock records (*mSupply*, other electronic, or paper) that tracked their family planning products. When combining the lack of stock keeping records with the limited number of staff trained in assessing stock levels, it is reasonable to assume that stockouts of family planning products are likely to occur more frequently than previously reported.

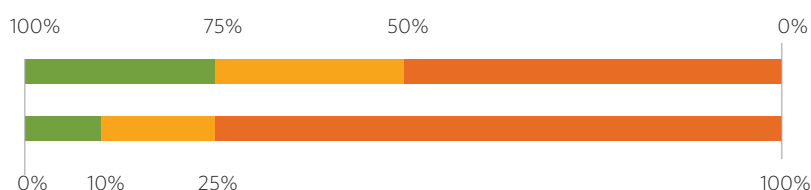
Additionally, the presence of expired products, particularly female condoms, injectables, and EC indicate poor planning and management of supplies among facility staff as well as insufficient supervision by the higher levels.

Table 27: Stock Management of Family Planning Products

	Facilities managing product	Expired products on day of visit	Stock cards available		Facilities managing product	Expired products on day of visit	Stock cards available
Male Condoms	96%	8%	5%	Injectables	86%	13%	8%
Female Condoms	67%	22%	8%	Emergency contraception	24%	14%	14%
Combined Oral Contraceptive	88%	8%	7%	Implants	41%	8%	10%
Progestin Only Pills	82%	9%	6%	IUCDs	11%	31%	25%

LEGEND

Facilities managing product?
Stock card available/updated?
Expired products on day of visit?



5. Recommendations

General

- Update Essential Drug List to match services listed in the Role Delineation Policy
- Update Role Delineation Policy to align with global best practices for providing comprehensive RMNACH service across all facility levels as well as ensure current facility practices are in-line with government policies. This includes updating language on provision of implants/Jadelle, pre-packed emergency contraception, secondary prevention of cervical cancer services, GBV services, AYF services, and screening of HIV and other STIs

Maternal Health

- Update all maternal and newborn care guidelines, protocols and standards to ensure consistency and alignment with current evidence and international standards. Updated guidelines and materials should be widely disseminated and made available at all levels of care. Providers should have easy access to documents and be able to refer to them while on duty.
- Provide ongoing structured mentoring and support for staff from managers and supervisors to ensure quality of maternal and newborn health care services
- Ensure that integrated ANC are available at all facilities in the country and include: prevention of parent-to-child transmission of HIV (PPTCT), hepatitis B and syphilis; family planning; sexual and reproductive health; point of care testing/screening for HIV and STIs; and cervical cancer screening. Services should be provided by appropriately trained providers receive appropriate training and staff supervision of clinical practices should be prioritized to ensure staff are following international standards and protocols for MH services.
- Update PNC standards of practice to include offering FP services postpartum and delivery of key child vaccines (BCG, Hepatitis B and Tetanus Toxoid) during 6,10 and 14 weeks.
- Improve standards at hospitals and health centres for births through strengthening accessibility via transport and establishing clear supported pathways that articulate personnel, position titles and contact details for seeking guidance, permission and support for referrals.
- Consider establishing Maternity Waiting Homes for late-stage pregnancy (36 weeks) at designated health facilities where rapid referral in response to sudden late-stage complications and/or obstetric emergency is not possible/practical.
- Invest in infrastructure and equipment to ensure ANC services and safe deliveries can be provided in accordance with the RDP and standard service guidelines. All facilities earmarked to provide delivery services should be properly equipped with essential equipment and medicine to function properly in compliance with the policy (including provision of BEmONC and CEmONC services). Facility managers and government health officials should conduct internal audits of equipment and repair or replace broken pieces. SOPs should also be developed to ensure that specific items are always located in delivery rooms and are maintained so that they can be used without any additional steps that would delay immediate response to an emergency.
- Prioritize improving the capacity of health centres to reach BEmONC standards and address gaps in staffing, equipment and drugs at hospitals and health centres to enable them to provide all signal functions of BEmONC and CEmONC.

Family Planning

- Review and revise family planning guidelines in accordance with updated global recommendations. These updated guidelines should be widely disseminated and promoted to health service managers, supervisors and providers. Providers should also receive structured refresher course on revised guidelines and practices.
- Update current policy to enable provision of implants at lower levels of the health system as part of efforts to ensure clients have a choice for a long-term methods
- Establish MOUs with non-government partners/organisations to expand FP services in the country. Through these agreements, the MOH must also ensure a ready supply of a wide range of short-, long-acting and emergency contraceptives to all implementing agencies.
- Ensure that family planning services, including choice of contraception, are provided free of coercion and conducted in a private, comfortable and confidential environment. Choice of contraception should be decided by the individual client regardless of age, marital status or disability status.

Cervical Cancer

- Ensure that cervical cancer prevention policies and guidelines to all facilities.
- Expand availability of secondary cervical cancer prevention services, including screening for and treatment of pre-cancer lesions to all facility levels and integrated into ANC and other RMNCAH service per recommended policies.
- Strengthen efforts to equip health care providers with the necessary competencies and skills to provide secondary cervical cancer prevention services on a routine basis. All health workers operating from facilities designated to deliver secondary cancer prevention, treatment of pre-cancerous lesions and primary referral services should receive initial and follow-up training on the Cervical Cancer Clinical Guidelines. Trainings should be reinforced through structured supported supervision.
- Create awareness on preventability of cervical cancer, including availability of services including screening, referrals and HPV vaccination through structured outreach to dispensaries (and other lower level facilities).
- Establishment of a national cancer registry for all cancers (including cancers of the reproductive system) to track screening, testing, and treatment regimes, outcomes and duration.

STI, including HIV, Services

- Finalise the National HIV Testing and Counselling Policy, and HIV Testing Guidelines. Once completed, these guidelines should be widely disseminated and promoted to health service managers, supervisors and providers to help strengthen voluntary confidential counselling and testing (VCCT) at hospitals, outpatient clinics and antenatal services. Providers should also receive structured course on guidelines and practices.
- Scale-up HIV and STI point of care/rapid testing (inclusive of stock supply, SOPs and training for health workers), and where these are not available/appropriate, expand resourcing for improved laboratory capacity (including sufficient trained human resources to cover periods of staff absence, and appropriate stocks of consumables and equipment).
- Integrated prevention of parent-to-child transmission of HIV (PPTCT), Hepatitis B and syphilis through antenatal care clinics, and consultations for family planning and sexual and reproductive health.

Adolescent and Youth-Friendly Services

- Strengthen and expand AYF services to all facilities, ensuring that services are more accessible, acceptable and affordable for young people. Health providers should receive training on AYF service provisions and referral pathways. Additionally, facilities should allocate spaces for counselling rooms that provide audio and visual privacy. For many facilities, investments in infrastructure will be necessary to ensure this privacy.
- Finalise AYF guidelines and associated IEC materials and distribute to all facilities. Health service managers, supervisors and providers should be trained on updated guidelines with practices reinforced through structured supervisory support.
- In line with guidelines, work with the individual communities served by the facility and identify opportunities to offer flexible hours of operation to better cater to client needs. This could include expanded evening or weekend hours.
- Address the barrier of requiring adult consent for SRH services to enable young people to access appropriate services
- Development mechanisms to ensure youth engagement in the process of health service planning, management, monitoring and delivery. The MOH and provincial/sub-provincial Departments of Health should actively seek-out and work with Youth Council representatives at various levels to join/participate in community and provincial Health Committees, periodic monitoring and support to service delivery (through peer education, community mobilisation and outreach).

Gender-Based Violence Services

- Finalise and release Gender-Based Violence Guidelines and SOPs to support identification and response for survivors of GBV, including clinical management of rape and medical legal documentation and sourcing services from outside health sector (such as counselling and survivor support or justice and legal services).
- Expand GBV services to all facilities in compliance with the *Essential Services Package for Women and Girls Subject to Violence* which includes appropriate facilities and staff competent to identify, refer, treat and document cases of GBV.³²
- In coordination with roll out of new guidelines, strength all health workers capacity on the provision of health care responses for survivors of GBV, including treatment and safe and effective referral to specialist services. Structured training should include empathetic reception, support and counselling practices, and confidentiality and referral protocols. Additionally, capacity building should also include components that challenges health worker attitudes toward gender and social norms, which can dictate response services.
- Develop job aids and IEC materials for health workers and clients to better identify, treat and provide services to survivors.
- Strengthen linkages between health facilities and cross-sectoral networks (with counselling and social support organisations such as Vanuatu Women's Centre, law enforcement and community-based support individuals and organisations), and regularly reviewing and updating contact names and details to ensure support to survivors when needed.
- Invest in infrastructure to ensure that health facilities are equipped with confidential examination rooms providing audio and visual privacy in order to protect the survivor's confidentiality and support a high level of comfort as well as the appropriate resources to receive and provide immediate health and social support to survivors. This to include maintenance of sexual assault examination and testing kits ('rape kits'), emergency contraceptives and post-exposure prophylaxis for HIV and STIs.
- Increase support for collecting data related to identified cases of GBV, including the development of stronger case management systems that support countrywide referral and administrative data collection.

Integrated Maternal and Reproductive Health Services

- Increase availability of integrated maternal and reproductive health services in line with the Vanuatu' package of essential health services. This includes ensuring that family planning information and commodities, point of care testing/screening for HIV and STIs; cervical cancer screening and other RMNACH essential services can be accessible from a health facility at any time, regardless of the main reason for the visit.
- Ensure health care providers have the necessary competencies and skills to provide integrated maternal and reproductive health services.
- Expand management of ECs to lower level facilities, especially those intended for GBV response

Supply Chain and Reproductive Health Commodity Security

- Review central level procurement and distribution practices to ensure that all products listed in Vanuatu's EML are in full or near-full supply at the appropriate levels.
- Finalise, adopt and roll out updated Contraceptive Logistics Management System SOPs with update logistics management tools and practices, including stock cards, ordering and resupply forms, and data reporting, and ensure their availability and use at each level of the supply chain
- Strengthen health providers capacity in logistics management, specifically, proper use of logistic management forms, understanding of stockouts or low supply, and proper policy around stock management. It is important to strengthen capacity in logistics management through training, supportive supervision, and the availability of guidelines and/or job aids that enable health workers to do their job more accurately and effectively.
- Invest in expanded digital logistics and stock management information systems and tracking platforms, such as mSupply and Tupaia. .
- Review quantification and supply planning procedures, and train personnel in quantification. Quantification and supply planning should also take into account stock requirements of non-government service providers operating under an MOU with the MOH.
- Review and update supportive supervision practices to ensure facilities that fall behind in logistics management can be identified and receive the support that they need.
- Review current policies for disposal of expired medicines and equipment unable to be repaired and, if necessary, conduct dejunking exercise to remove and dispose of all expired products and broken equipment in health facilities. Develop waste management protocols to ensure safe disposal of expired commodities consistent with environmental conservation commitments, and to mitigate further exacerbation of climate effects.
- Invest in training adequate appropriate cadres of staff – dispensers, pharmacists

Health Management Information System

- Continue roll out of updated registers and HMIS summary tools to ensure that services provided are accurately captured and reported to the higher authority.
- Revise reporting procedures and develop reporting cycles to enable transparency and information sharing at all levels of the system.
- Train staff in the proper use of health management forms and reporting cycles. Routine supportive supervision visits should be used to reinforce this learning.

Disability-inclusive Services

- Adopt a twin-track approach to the provision of SRH and GBV services to guarantee that persons with disabilities have access to the range of services, involvement, and integration necessary to realize their rights. Following this approach, expand the availability of disability-inclusive sexual and reproductive health and gender-based violence services.
- In addition to ensuring that all facilities are fully accessible to people with disabilities and up to building codes, the MOH should guarantee the availability of disability-inclusive intake forms and IEC materials in accessible formats (Braille; large print; audio; digital formats, compatible with screen readers; sign language with an interpreter of a preferred gender, captioning; simplified formats; and pictorial guides).
- Train staff on how to provide disability-inclusive services to people with disabilities and provide them with guidelines and job-aids that outline standard operating procedures to serve patients with disabilities. Engage women and young persons with disabilities, disabled person's organizations, and families of persons with disabilities (where appropriate), in all stages of the review and development of these guidelines and protocols.
- Strengthen networks, partnerships and linkages between facilities and disability organizations and associations to promote resource sharing and to bolster available support services.
- Implement programme and policy safeguards to ensure that all SRH services are only provided on a voluntary basis with the free and informed consent of the person with a disability, including for disclosure of information. Implement monitoring mechanisms that provide oversight to SRHR service providers to ensure that informed consent is being attained appropriately.

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Annex 1: Definitions

The following definitions were used during the assessment:

“In the facility”:

- For primary level facilities, this refers to the facility as a whole.
- In hospitals, this refers to all the areas/units/wards where the RMCH services are provided plus the main pharmacy and store rooms (e.g., enumerators went into surgery wards to assess availability of equipment and supplies.)

“In the delivery room”:

- This refers to the room(s) or nearby area(s) where deliveries take place. In cases where a medicine cart was used, if the cart was positioned outside of the delivery room, with the expectation of being rolled into the room during delivery, it was considered “in the delivery room.” If a medicine cart was located elsewhere (e.g., in the PNC ward) it was not considered “in the delivery room.”

Availability/Expiries on day of visit:

- Any usable and/or expired medicines located in the delivery room were considered to also be available/expired in the facility. The reverse however was not assumed.
- For usable/expired FP product counts, products located in the facility’s primary FP storage area (e.g., room, cabinet, drawer) were included in the count. Those that had already been dispensed to other wards were excluded.

Stockout/unavailable: Absence of any usable product within designated areas.

Foetal stethoscope: Doppler/ funduscope/ CTG (i.e., any foetal heart monitoring device). Adult or nurse stethoscope were not considered to be a foetal stethoscope.

Examination light: Any light source, including a flashlight, that can be focused on a specific area; general overhead lights were excluded.

Towel for drying babies: Any small/medium piece of cloth designated for drying babies; regular bed sheets were excluded.

ICT (mobile/internet): Only considered available if provided by the facility

Clock with a timer: Owned by the facility and located on the wall or otherwise in clear sight of delivery beds or part of the official uniform. Personal watch or phone were excluded

Annex 2: Product List

Group	Products	
Family Planning	Combined Oral Contraceptives (Microgynon)	Intrauterine Devices (IUCD)
	Female Condoms	Male Condoms
	Implants (Jadelle)	Pre Packed Emergency Contraceptives
	Injectable Contraceptives (DMPA-IM/Depo)	Progestin-Only Pills (Microlute)
Maternal and Newborn Health (ANC and PNC services)	Antibiotic eye ointment for newborns	Iron Tablets/Tonic (<i>Ferrous Sulphate or Ferrous Gluconate, etc.</i>)
	Antibiotics (Ampicillin, Azithromycin, Benzathine Penicillin, Cefixime, etc.)	Lancets
	Anti-hypertensive medicines (Hydralazine, Methyl Dopa, or Nifedipine)	Mebendazole
	Calcium Gluconate	Metronidazole
	Corticosteroids Betamethasone or Dexamethasone)	Microcuvettes
	Folates/Folic Acid	Tetanus Toxoid
	Glucose Test Strips (to Use With Glucometer)	Urine Dipsticks
Safe Delivery	Ergometrine	Magnesium Sulphate
	Oxytocin	Misoprostol
	Sodium lactate solution/infusion (Ringer lactate) or normal saline	
HIV and STI	HIV Test Kits	Syphilis Test Kits
	Combined HIV and syphilis Test Kit	

Annex 3: List of Facilities Visited

Province	Facility name	Facility type	Level	Managing authority
Malampa	Akhamb	Dispensary	Primary care	Public
	Amelatin (Lambubu)	Dispensary	Primary care	Public
	Atchin	Health Centre	Secondary care	Public
	Aulua	Dispensary	Primary care	Public
	Baiap	Health Centre	Secondary care	Public
	Bonvor	Dispensary	Primary care	Private
	Carolyn Bay	Dispensary	Primary care	Public
	Endu	Dispensary	Primary care	Public
	Espigles Bay	Health Centre	Secondary care	Public
	Lamap	Health Centre	Secondary care	Public
	Lehili	Dispensary	Primary care	Public
	Leviamp	Dispensary	Primary care	Public
	Liro	Health Centre	Secondary care	Public
	Maskelynes (Vanmaur)	Dispensary	Primary care	Public
	Nebul	Health Centre	Secondary care	Public
	Norsup	Hospital	Secondary care	Public
	Olal	Dispensary	Primary care	Public
	Port Vato (Melumlum)	Dispensary	Primary care	Public
	Rensarie	Dispensary	Primary care	Public
	Sameou	Dispensary	Primary care	Public
	South West Bay (Wintua)	Health Centre	Secondary care	Public
	Tanmaru	Dispensary	Primary care	Public
	Tisman	Dispensary	Primary care	Public
	Tontar	Dispensary	Primary care	Public
	Unmet	Dispensary	Primary care	Public
	Uripiv	Dispensary	Primary care	Public
	Utas	Health Centre	Secondary care	Public
	Vao	Dispensary	Primary care	Public
	Vinmavis	Dispensary	Primary care	Public
	Wallarano	Health Centre	Secondary care	Public

Province	Facility name	Facility type	Level	Managing authority
Penama	Abwatuntora (Mauna)	Health Centre	Secondary care	Public
	Aligu (Renbura)	Dispensary	Primary care	Public
	Angoro	Dispensary	Primary care	Public
	Asanvari	Dispensary	Primary care	Public
	Aute	Dispensary	Primary care	Public
	Baie Barrier	Dispensary	Primary care	Public
	Bwatnapni	Dispensary	Primary care	Public
	Enkul	Dispensary	Primary care	Public
	Kerembei	Health Centre	Secondary care	Public
	Latano	Dispensary	Primary care	Public
	Ledungsivi	Health Centre	Secondary care	Public
	Lelevia (Neyrora)	Dispensary	Primary care	Public
	Lesasa	Dispensary	Primary care	Public
	Lolowai	Hospital	Secondary care	Public
	Mann (Walaha)	Dispensary	Primary care	Public
	Melsisi	Health Centre	Secondary care	Public
	Naleoleo	Dispensary	Primary care	Public
	Namaram	Dispensary	Primary care	Public
	Nasawa	Dispensary	Primary care	Public
	Naviso (Mamaluvana)	Dispensary	Primary care	Public
	Nduindui	Health Centre	Secondary care	Public
	Pangi	Health Centre	Secondary care	Public
	Point Cross	Dispensary	Primary care	Public
	Ranmawat	Dispensary	Primary care	Public
	Tari Ilo (Nabarangiut)	Dispensary	Primary care	Public
	Vandue	Dispensary	Primary care	Public
Sanma	Aore	Dispensary	Primary care	Public
	Atariboe	Dispensary	Primary care	Public
	Avunatari	Health Centre	Secondary care	Public
	Banaviti	Dispensary	Primary care	Public
	Bene	Health Centre	Secondary care	Public
	Capricorn	Dispensary	Primary care	Public
	Family Health (VFHA)	Clinic	Primary care	Private
	Fanafo	Health Centre	Secondary care	Public
	Hog Harbour	Dispensary	Primary care	Public
	Kole	Dispensary	Primary care	Public

Province	Facility name	Facility type	Level	Managing authority
Sanma	Lamalvatu	Clinic	Primary care	Private
	Malau	Health Centre	Secondary care	Public
	Maternal Child Health Clinic (MCH)	Clinic	Primary care	Public
	Matevulu College	Clinic	Primary care	Private
	Medical Santo (Church of Christ Mini Hospital)	Health Centre	Secondary care	Private
	Natawa	Dispensary	Primary care	Public
	Neil Thomas Ministries (NTM)	Clinic	Primary care	Private
	Nokuku	Health Centre	Secondary care	Public
	Northern Provincial Hospital	Hospital	Tertiary care	Public
	Paparama	Dispensary	Primary care	Private
	Pelvus	Dispensary	Primary care	Public
	Penour (Lelesvare)	Dispensary	Primary care	Public
	Pesena	Dispensary	Primary care	Public
	Port Olry	Health Centre	Secondary care	Public
	Rustron	Dispensary	Primary care	Public
	Sapi (Nabulvaravara)	Dispensary	Primary care	Public
	Sara	Dispensary	Primary care	Public
	Sarakata	Dispensary	Primary care	Public
	Saramauri	Health Centre	Secondary care	Public
	Selei	Dispensary	Primary care	Public
	Sulemauri	Dispensary	Primary care	Public
	Tasiriki	Health Centre	Secondary care	Public
	Tasmalum	Health Centre	Secondary care	Public
	Tasmate	Dispensary	Primary care	Public
	Tataikala	Dispensary	Primary care	Public
	Tiroas	Dispensary	Primary care	Private
	Tutuba	Dispensary	Primary care	Public
	Vaturei (Iarailand)	Dispensary	Primary care	Public
	Vulesepe	Health Centre	Secondary care	Public
	Wailapa (Isu)	Dispensary	Primary care	Public
	Wunavae	Dispensary	Primary care	Public
	Wunpuku	Dispensary	Primary care	Public
	Wusi (Ioseph Mape)	Dispensary	Primary care	Public

Province	Facility name	Facility type	Level	Managing authority
Shefa	Amauri (Lelepa)	Dispensary	Primary care	Public
	Amboh (Tongariki)	Dispensary	Primary care	Public
	Anabrou Special Needs Clinic	Clinic	Primary care	Private
	Burumba	Dispensary	Primary care	Public
	Erakor	Dispensary	Primary care	Public
	Erasa (Numbatri)	Dispensary	Primary care	Public
	Family Care Centre	Clinic	Primary care	Private
	Gudfala Health Centre (NTM)	Health Centre	Secondary care	Private
	K.B. Kalwuat Memorial	Health Centre	Secondary care	Private
	Kampushum Hed (Wan Smol Bag)	Clinic	Primary care	Private
	Leimarowia (Moso)	Dispensary	Primary care	Public
	Marowia (Emau)	Dispensary	Primary care	Public
	Maurifanga (Imere)	Health Centre	Secondary care	Public
	Medical Options Vanuatu	Clinic	Primary care	Private
	Ngala	Dispensary	Primary care	Public
	Nodamasan	Clinic	Primary care	Private
	Novo Medical Centre	Clinic	Tertiary care	Private
	Port Quimie	Dispensary	Primary care	Public
	Rafaremauri (Ifira)	Dispensary	Primary care	Public
	Saupia (Paunangisu)	Health Centre	Secondary care	Public
	Silimaui	Health Centre	Secondary care	Public
	Silmoli (Nguna)	Dispensary	Primary care	Public
	St Camille de Ielis (Namburu)	Dispensary	Primary care	Private
	Tavalapa	Dispensary	Primary care	Public
	Teiwaikara (Freshwota)	Dispensary	Primary care	Public
	Vaemali	Health Centre	Secondary care	Public
	Vaemaui	Health Centre	Secondary care	Public
	Vanuatu Family Health	Clinic	Primary care	Private
	Vanuatu Private Hospital	Clinic	Primary care	Private
	Vila Central Hospital	Hospital	Tertiary care	Public
	Votlo	Dispensary	Primary care	Public
	Wellu	Dispensary	Primary care	Private

Province	Facility name	Facility type	Level	Managing authority
Tafea	Dillons Bay (Williams Bay)	Dispensary	Primary care	Public
	Green Hill	Health Centre	Secondary care	Public
	Iet (Louieru)	Dispensary	Primary care	Public
	Ikiti	Dispensary	Primary care	Public
	Ikuarmanu	Dispensary	Primary care	Public
	Imaki	Health Centre	Secondary care	Public
	Iounanen	Dispensary	Primary care	Public
	Ipota	Dispensary	Primary care	Public
	Kitow (Nagus Kasaru)	Health Centre	Secondary care	Public
	Lamlu (St Raphael)	Dispensary	Primary care	Private
	Lenakel	Hospital	Secondary care	Public
	Loanialu (Kapelpel)	Clinic	Primary care	Private
	Naukero (Futuna)	Dispensary	Primary care	Public
	Port Narvin	Dispensary	Primary care	Public
	Port Resolution	Dispensary	Primary care	Private
	Rotobeca (Aniwa)	Dispensary	Primary care	Public
	Tanyepa	Dispensary	Primary care	Public
	White Sands (Iatalakei)	Health Centre	Secondary care	Public
	Yorien	Dispensary	Primary care	Public
Torba	Hanington (Vetuboso)	Dispensary	Primary care	Public
	Lehali	Dispensary	Primary care	Public
	Loh	Health Centre	Secondary care	Public
	Mataka	Health Centre	Secondary care	Public
	Qaet Vaes	Hospital	Secondary care	Public
	Robul (Lequel)	Dispensary	Primary care	Public
	Sarawia	Dispensary	Primary care	Public
	Wings of Hope	Clinic	Secondary care	Private
	Womal Dolap	Dispensary	Primary care	Public

Annex 4: Services and Staffing

Number of women who have received services in the last 6 months

(Based on available records and reports)

	Malampa		Penama		Sanma		Shefa		Tafea		Torba		Total	
	Number of women	Number of facilities	Number of women	Number of facilities	Number of women	Number of facilities	Number of women	Number of facilities	Number of women	Number of facilities	Number of women	Number of facilities	Number of women	Number of facilities
ANC services	1,162	28	2,012	26	1,960	23	9,902	14	1,163	16	382	9	16,581	116
PNC services	291	24	389	25	1,026	23	531	14	772	10	84	9	3,043	98
Delivery services	488	22	495	19	2,185	14	2,727	10	640	16	171	9	6,706	90
Received FP services (3 months)	2,931	23	841	25	2,863	28	3,058	20	1,027	16	223	7	10,943	119
New users/ acceptors of modern FP methods	222	22	213	24	899	24	281	13	359	13	47	7	2,021	103

Number of Healthcare Workers in Vanuatu by Cadre

Generalist- Full Time	89	Midwife-Full Time	83	These figures are inclusive of all healthcare workers based throughout the entire facility and are based on information collected by enumerators during facility visits. As such, figures might differ from those listed in the other reports.
Generalist-Part Time	28	Midwife-Part Time	5	
Specialist-Full Time	32	Pharmacist	8	
Specialist-Part Time	18	Lab Techs	28	
Nurse Practitioner	39	Nurse aids	161	
Nurse-Full Time	413	Pharmacy Assistant/Other Assistant	10	
Nurse-Part Time	80	CHWs	188	
Definitions				
Generalists: MOs without post grad qualifications		Pharmacist: Pharmacists (bachelor), Pharm Tech (diploma), pharm assistant (certificate)		
Specialists: PMO and above or Post grad diploma and above		Lab tech: Lab tech, lab scientist, phlebotomist		
Nurse practitioners: Practicing NPs		Assistants/ Other: Enrolled nurses, ward assistants, orderly, Peer educators		
Nurses: Diploma and bachelor, RNs,		CHW: Village Health Workers		
Midwives: Practicing Midwives in the facility				

Annex 5: UNFPA PDD Indicators

1. Percentage of Primary SDPs that are providing at least 3 modern methods of contraception on the day of assessment. [UNFPA Supplies Indicator 1.3.1]	65%
2. Percentage of Secondary/Tertiary SDPs that are providing at least 5 modern methods of contraception on the day of assessment. [UNFPA Supplies Indicator 1.3.2]	9%
3a. Percentage of SDPs with stockout of any family planning method or product (day of last visit)	39%
3b. Percentage of SDPs with stockout of any family planning method or product/last 6 months). [UNFPA Supplies Indicator Proposed 1]	22%

Note for Indicator 3a and 3b. Facilities were only considered stock-out of method if facility reported managing product during the previous 12 months. Indicator 3b is calculated based on responses from provider and considered 6 month recall.

Annex 6: Effects of Tropical Cyclone Harold

On April 6th, 2020, TC Harold made landfall in Vanuatu as a category 5 cyclone, causing widespread destruction across Sanma, Penama, and Malampa provinces and the northern islands of Shefa province, affecting approximately 88 facilities across these provinces. As part of this assessment (which took place October-November 2020), we analysed results based affected/non affected facilities. The following table present the results on availability of key RMNCAH services, equipment and medicine by. (The full analysis of all indicators are available upon request.)

As shown in the following tables, there are few service differences between TC Harold affected facilities and non-affected facilities. However, the data does show differences in HMIS training and supervision practices between the affected and non-affected facilities, indicating that the cyclone may have disrupted HMIS training provision or displaced trained staff. The data further shows that increased MH and FP supervision is being conducted at the cyclone affected facilities, indicating the MOH's commitment to supporting these facilities return to regular service function.

Table 28: Key HSRFA Service Indicators (excluding delivery services)

	Not affected (n=71)	Affected (n=88)	Total (n=159)
Family Planning			
Facilities providing facility planning services	96%	96%	96%
Facilities that are family planning ready	47%	31%	38%
Primary facilities with three or more methods of FP products available on day of visit*	62%	68%	65%
Secondary and tertiary facilities with five or more methods of FP products available on day of visit*	14%	12%	13%
Antenatal and Postnatal Care			
Facilities providing ANC services	72%	68%	70%
Facilities providing PNC services	65%	59%	62%
Facilities that are ANC and PNC ready	6%	5%	5%
Other Health Services			
Facilities providing secondary prevention of cervical cancer services	16%	9%	12%
Facilities providing HIV and AIDs services	23%	11%	16%
Facilities providing STI services	85%	78%	81%
Facilities that are STI (including HIV) ready	8%	7%	8%
Facilities able to provide minimum services for gender-based violence that meets global standards	0%	0%	0%
Other Services			
Facilities providing adolescent and youth-friendly services according to global standards	0%	0%	0%
Facilities that have staff trained to work with people with disabilities	17%	13%	15%

	Not affected (n=71)	Affected (n=88)	Total (n=159)
Commodity and Health Management Information Systems			
Facilities that have staff trained in logistics management for health supplies	68%	23%	43%
Facilities that have staff trained in assessing stock, including knowledge of minimum and maximum stock balances	76%	24%	47%
Facilities that have received FP supervision visits in the previous 6 months	34%	64%	50%

*different denominator than shown in columns

Table 29: Key delivery services indicators

	Not affected (N=42)	Affected (N=46)	Total (N=88)
Delivery Services			
Facilities routinely providing delivery services*	59%	52%	55%
Facilities providing deliveries that are ready to provide vaginal deliveries	0%	0%	0%
Facilities providing deliveries that comply with global safe delivery practices	2%	0%	1%
Facilities providing deliveries that provide all signal functions of BEmONC	2%	2%	2%
Facilities providing deliveries that provide active management of third stage of labour services	90%	93%	92%

*different denominator than shown in columns

Annex 7: Individual Facility Key Results

Province	Facility Name	PEHS Levels	Facility Level	Availability of trained staff				Availability of services				
				Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Youth Friendly	Adolescent and Sexual based Violence	
Shefa	Vila Central Hospital	Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Vaemali	Health Centre	Secondary	×	✓	✓	✓	✓	✓	✓	✓	×
	Saupia (Paunangisu)	Health Centre	Secondary	×	×	✓	✓	✓	✓	✓	✓	✓
	Silimaui	Health Centre	Secondary	×	×	×	✓	✓	✓	✓	✓	✓
	Erasa (Numbatri)	Dispensary	Primary	×	×	×	×	✓	×	×	×	✓
	St Camille de Ielis (Namburu)	Dispensary	Primary	×	×	×	×	✓	×	×	×	✓
	Teiwaikara (Freshwota)	Dispensary	Primary	×	×	×	×	✓	×	×	✓	✓
	Wellu	Dispensary	Primary	×	×	×	×	✓	×	×	×	✓
	Anabrou Special Needs Clinic	Clinic	Primary	×	×	✓	×	✓	×	×	×	×
	Nodamasan	Clinic	Primary	×	×	✓	×	✓	×	×	✓	×
	K.B. Kaluwat Memorial	Health Centre	Secondary	×	×	✓	×	✓	×	×	×	×
	Family Care Centre	Clinic	Primary	×	✓	✓	×	✓	×	×	✓	✓
	Novo Medical Centre	Clinic	Tertiary	✓	✓	✓	×	×	×	×	×	✓
	Vanuatu Private Hospital	Clinic	Primary	×	✓	×	×	✓	×	×	✓	✓
	Medical Options Vanuatu	Clinic	Primary	✓	✓	×	×	×	×	×	×	✓
	Amauri (Lelepa)	Dispensary	Primary	×	×	×	×	✓	×	×	×	✓
	Ngala	Dispensary	Primary	×	×	×	×	✓	✓	✓	✓	✓
	Burumba	Dispensary	Primary	×	×	✓	×	✓	✓	×	×	✓
	Vaemaui	Health Centre	Secondary	✓	×	✓	✓	✓	✓	×	×	✓
	Amboh (Tongariki)	Dispensary	Primary	×	×	×	×	✓	✓	✓	✓	✓
	Marowia (Emau)	Dispensary	Primary	✓	×	✓	×	✓	×	×	×	×
	Silimoli (Nguna)	Dispensary	Primary	×	×	✓	×	✓	×	×	×	×
	Maurifanga (Imere)	Health Centre	Secondary	×	×	✓	✓	✓	×	×	✓	✓
	Erakor	Dispensary	Primary	×	×	×	×	✓	×	×	×	×
	Rafaremaui (Ifira)	Dispensary	Primary	×	×	✓	×	✓	×	×	×	×
	Port Quimie	Dispensary	Primary	×	×	✓	×	✓	×	✓	×	×
	Tavalapa	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓	✓
	Leimarowia (Moso)	Dispensary	Primary	×	×	×	×	✓	×	×	×	×
	Votlo	Dispensary	Primary	×	×	×	×	×	×	×	×	×
	Gudfala Health Centre (NTM)	Health Centre	Secondary	×	✓	✓	✓	✓	×	×	✓	✓
	Vanuatu Family Health	Clinic	Primary	×	×	✓	✓	✓	×	×	✓	✓
	Kampushum Hed (Wan Smol Bag)	Clinic	Primary	×	×	✓	×	✓	×	×	✓	✓

Province	Facility Name	PEHS Levels	Facility Level	Availability of trained staff				Availability of services			
				Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly	Sexual and Gender-based Violence
Taífa	Lenakel	Hospital	Secondary	✓	x	✓	✓	✓	✓	✓	✓
	White Sands (Iatalsei)	Health Centre	Secondary	x	x	✓	✓	✓	✓	x	✓
	Green Hill	Health Centre	Secondary	x	x	✓	✓	✓	✓	✓	✓
	Ilet (Louiuru)	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Kitow (Nagus Kasaru)	Health Centre	Secondary	x	x	✓	x	✓	x	✓	x
	Imaki	Health Centre	Secondary	x	x	x	✓	✓	✓	✓	✓
	Ikiti	Dispensary	Primary	x	x	✓	x	✓	✓	x	✓
	Dillions Bay (Williams Bay)	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Ipota	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Yorien	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Rotobeca (Aniwa)	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Naukero (Futuna)	Dispensary	Primary	x	x	x	x	✓	✓	✓	✓
	Loanialu (Kapelpele)	Clinic	Primary	x	x	✓	x	✓	✓	✓	✓
	Port Narvin	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Iounanen	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Ikuarmanu	Dispensary	Primary	x	x	x	x	✓	x	✓	✓
	Tanyepa	Dispensary	Primary	x	x	x	x	✓	x	✓	x
	Lamlu (St Raphael)	Dispensary	Primary	x	x	x	✓	✓	✓	✓	x
	Port Resolution	Dispensary	Primary	x	x	✓	✓	✓	✓	✓	✓
	Mataka	Health Centre	Secondary	x	x	✓	x	✓	✓	✓	✓
	Loh	Health Centre	Secondary	x	x	✓	x	✓	✓	✓	✓
	Wings of Hope	Clinic	Secondary	✓	✓	x	x	✓	✓	✓	✓
	Robul (Lequel)	Dispensary	Primary	x	x	x	x	✓	x	x	x
	Hanington (Vetuboso)	Dispensary	Primary	x	x	✓	✓	✓	✓	✓	✓
	Qaet Vaes	Hospital	Secondary	x	x	✓	✓	✓	✓	✓	✓
	Sarawia	Dispensary	Primary	x	x	✓	✓	✓	✓	x	x
	Lehali	Dispensary	Primary	x	x	x	x	✓	✓	✓	x
	Womal Dolap	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
Torba											

Province	Facility Name	PEHS Levels	Facility Level	Availability of trained staff				Availability of services				
				Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Youth Friendly	Adolescent and Sexual based Violence	Sexual and Gender-based Violence
Sanma	Northern Provincial Hospital	Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✓	✗
	Malau	Health Centre	Secondary	✗	✗	✓	✓	✓	✓	✓	✓	✓
	Port Olry	Health Centre	Secondary	✗	✓	✓	✓	✓	✓	✓	✓	✗
	Tasmalum	Health Centre	Secondary	✗	✗	✓	✓	✓	✓	✓	✓	✓
	Nokuku	Health Centre	Secondary	✗	✗	✓	✗	✓	✓	✗	✗	✗
	Avunatari	Health Centre	Secondary	✗	✗	✓	✓	✓	✓	✗	✗	✓
	Banaviti	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Maternal Child Health Clinic (MCH)	Clinic	Primary	✗	✗	✓	✓	✓	✗	✓	✓	✗
	Pelvus	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Tiroas	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗
	Lamalvatu	Clinic	Primary	✗	✗	✗	✓	✓	✗	✓	✓	✓
	Medical Santo (Church of Christ Mini Hospital)	Health Centre	Secondary	✓	✓	✓	✓	✓	✗	✗	✗	✓
	Natawa	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✓	✗
	Aore	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗
	Pesena	Dispensary	Primary	✗	✗	✓	✗	✓	✓	✗	✗	✗
	Saramauri	Health Centre	Secondary	✗	✗	✓	✓	✓	✓	✓	✓	✓
	Hog Harbour	Dispensary	Primary	✗	✗	✓	✓	✓	✓	✗	✗	✗
	Vulesepe	Health Centre	Secondary	✗	✗	✓	✗	✓	✓	✗	✗	✓
	Capricon	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗
	Tasiriki	Health Centre	Secondary	✗	✗	✓	✓	✓	✓	✗	✗	✓
	Sulemauri	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Tasmate	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✓	✗
	Wunpuku	Dispensary	Primary	✗	✗	✓	✓	✓	✓	✗	✗	✗
	Sarakata	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✓	✗
	Atariboe	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✓	✓
	Fanafo	Health Centre	Secondary	✗	✗	✓	✓	✓	✗	✗	✓	✓
	Tataikala	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗
	Wailapa (Isu)	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Bene	Health Centre	Secondary	✗	✗	✗	✗	✗	✗	✗	✗	✗
	Wusi (Joseph Mape)	Dispensary	Primary	✗	✗	✓	✗	✓	✓	✗	✗	✗
	Kole	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✓	✓	✗
	Rustron	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✓	✓	✓
	Sara	Dispensary	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗
	Selei	Dispensary	Primary	✗	✗	✓	✗	✓	✓	✓	✓	✗
	Tutuba	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗
	Vaturei (Iarailand)	Dispensary	Primary	✗	✗	✓	✗	✓	✗	✓	✓	✓
	Paparama	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Wunavae	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Matevulu College	Clinic	Primary	✗	✗	✗	✗	✓	✗	✓	✓	✓
	Sapi (Nabulvaravara)	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✓
	Penour (Lelesvare)	Dispensary	Primary	✗	✗	✗	✗	✓	✗	✗	✗	✗
	Family Health (VFHA)	Clinic	Primary	✗	✗	✓	✓	✓	✗	✓	✓	✓
	Neil Thomas Ministries (NTM)	Clinic	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗

Province	Facility Name	PEHS Levels	Facility Level	Availability of trained staff				Availability of services			
				Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly	Sexual and Gender-based Violence
Penama	Lolowai	Hospital	Secondary	✓	x	✓	✓	✓	✓	✓	✓
	Abwatuntora (Mauna)	Health Centre	Secondary	x	x	✓	✓	✓	✓	✓	✓
	Baie Barrier	Dispensary	Primary	x	x	✓	x	✓	✓	x	✓
	Kerembei	Health Centre	Secondary	x	x	✓	x	✓	✓	x	✓
	Meisisi	Health Centre	Secondary	x	x	✓	x	✓	x	x	✓
	Nduindui	Health Centre	Secondary	x	x	✓	✓	✓	✓	✓	x
	Lesasa	Dispensary	Primary	x	x	x	x	✓	x	x	✓
	Asanvari	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Aligu (Renbura)	Dispensary	Primary	x	x	✓	x	✓	✓	x	x
	Aute	Dispensary	Primary	x	x	✓	x	✓	✓	✓	x
	Bwatnapni	Dispensary	Primary	x	x	✓	x	✓	✓	✓	x
	Naleleo	Dispensary	Primary	x	x	✓	x	x	x	x	x
	Latano	Dispensary	Primary	x	x	x	✓	✓	✓	x	x
	Lelevia (Neyroro)	Dispensary	Primary	x	x	✓	x	✓	✓	x	x
	Namaram	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Nasawa	Dispensary	Primary	x	x	✓	✓	✓	✓	✓	x
	Point Cross	Dispensary	Primary	x	x	✓	x	✓	x	x	x
	Pangi	Health Centre	Secondary	x	x	✓	✓	✓	✓	✓	x
	Ranmawat	Dispensary	Primary	x	x	✓	x	✓	x	✓	x
	Ledungsivi	Health Centre	Secondary	x	x	✓	x	✓	✓	x	✓
	Naviso (Mamaluvana)	Dispensary	Primary	x	x	✓	x	✓	✓	✓	x
	Angoro	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Enkul	Dispensary	Primary	✓	x	✓	x	✓	✓	✓	x
	Tari Ilo (Nabarangiut)	Dispensary	Primary	x	x	✓	x	✓	✓	✓	✓
	Vandue	Dispensary	Primary	x	x	✓	x	✓	x	✓	✓
	Mann (Walaha)	Dispensary	Primary	x	x	✓	x	✓	x	✓	✓

Province	Facility Name	PEHS Levels	Facility Level	Availability of trained staff				Availability of services			
				Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly	Sexual and Gender-based Violence
Malampa	Norsup	Hospital	Secondary	✓	×	✓	✓	✓	✓	✓	✓
	Lamap	Health Centre	Secondary	×	×	✓	×	✓	✓	✓	×
	South West Bay (Wintua)	Health Centre	Secondary	×	×	✓	×	✓	✓	×	×
	Nebul	Health Centre	Secondary	×	×	✓	✓	✓	✓	✓	✓
	Utas	Health Centre	Secondary	×	×	✓	✓	✓	✓	✓	✓
	Baia	Health Centre	Secondary	×	×	✓	✓	✓	✓	×	✓
	Liro	Health Centre	Secondary	×	×	✓	✓	✓	✓	✓	✓
	Sameou	Dispensary	Primary	×	×	×	×	✓	×	×	×
	Aulua	Dispensary	Primary	×	×	✓	×	✓	✓	×	×
	Tisman	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Carolyn Bay	Dispensary	Primary	×	×	×	✓	✓	✓	×	×
	Akhamb	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Vinmavis	Dispensary	Primary	×	×	✓	×	✓	×	✓	×
	Unmet	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Leviamp	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Tanmaru	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Tontar	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Atchin	Health Centre	Secondary	×	×	✓	✓	✓	✓	×	×
	Wallarano	Health Centre	Secondary	×	×	✓	×	✓	×	✓	✓
	Vao	Dispensary	Primary	×	×	×	✓	✓	✓	✓	×
	Rensarie	Dispensary	Primary	×	×	✓	×	✓	✓	×	×
	Olal	Dispensary	Primary	×	×	×	×	×	×	×	×
	Endu	Dispensary	Primary	×	×	✓	×	✓	✓	×	✓
	Port Vato (Melumlum)	Dispensary	Primary	×	×	✓	×	✓	✓	✓	×
	Lehili	Dispensary	Primary	×	×	✓	×	✓	✓	✓	✓
	Amelatin (Lambubu)	Dispensary	Primary	×	×	✓	×	✓	×	×	×
	Maskelynes (Vanmaur)	Dispensary	Primary	×	×	✓	×	✓	✓	×	×
	Uripiv	Dispensary	Primary	×	×	×	×	✓	✓	×	×
	Espigles Bay	Health Centre	Secondary	×	×	×	×	✓	✓	×	×
	Bonvor	Dispensary	Primary	×	×	✓	×	✓	✓	×	×

Delivery

Province	Facility Name	Facility Level	Availability of trained staff				Availability of services			BEmONC	BEmONC Signal Functions												CEmONC	CEmONC Functions				
			Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly		Sexual and Gender-based Violence	Fully BEmONC Compliant	Provides prevention & treatment of eclampsia & pre-eclampsia	Has magnesium sulfate, calcium gluconate, and antihypertensives in delivery room	Provides uterotonic drugs	Provides parenteral antibiotics	Has antibiotics in stock in delivery room on day of visit	Provides removal of retained products of conception	Provides basic neonatal resuscitation	Has functional resuscitation bag and mask size 1 for term babies	Has resuscitation bag and mask size 1 in delivery room	Has functional resuscitation bag and mask size 0 for preterm babies		Has resuscitation bag and mask size 0 in delivery room	Provides manual removal of placenta	Provides instrumental deliveries	Fully CEmONC Compliant	Provides emergency blood transfusions
Shefa	Vila Central Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	×	✓	✓	×	✓	✓	✓	✓	✓	×	×	✓	×	×	×	×	×	✓	✓
	Lenakel	Secondary	✓	×	✓	✓	✓	✓	✓	×	✓	×	×	✓	✓	✓	✓	×	×	×	×	✓	✓	×	×	✓	×	
	Vaemali	Secondary	×	✓	✓	✓	✓	✓	✓	×	×	✓	×	×	✓	×	×	✓	×	✓	×	✓	×	×	×	×	×	
	Saupia (Paunangisu)	Secondary	×	×	✓	✓	✓	✓	✓	×	✓	×	×	×	×	×	✓	✓	×	✓	×	✓	×	×	×	×	×	
	Silimauroi	Secondary	×	×	×	✓	✓	✓	✓	✓	×	✓	✓	✓	✓	×	✓	✓	×	✓	×	✓	×	×	×	×	×	
	Erasa (Numbatri)	Primary	×	×	×	×	✓	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	St Camille de Ielisi (Namburu)	Primary	×	×	×	×	✓	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Teiwaikara (Freshwota)	Primary	×	×	×	×	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Wellu	Primary	×	×	×	×	✓	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Anabrou Special Needs Clinic	Primary	×	×	✓	×	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	K.B. Kalwuat Memorial	Secondary	×	×	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Family Care Centre	Primary	×	✓	✓	×	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Novo Medical Centre	Tertiary	✓	✓	✓	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Vanuatu Private Hospital	Primary	×	✓	×	×	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Medical Options Vanuatu	Primary	✓	✓	×	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Amauri (Lelepa)	Primary	×	×	×	×	✓	×	×	✓	×	✓	×	✓	×	✓	✓	×	×	×	×	×	✓	✓	×	×	×	
	Ngala	Primary	×	×	×	×	✓	✓	✓	✓	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	
	Burumba	Primary	×	×	✓	×	✓	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Vaemauroi	Secondary	✓	×	✓	✓	✓	✓	×	✓	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	✓	×	×	×	×	
	Amboh (Tongariki)	Primary	×	×	×	×	✓	✓	✓	✓	×	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	
	Marowia (Emau)	Primary	✓	×	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Silmoli (Nguna)	Primary	×	×	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Maurifanga (Imere)	Secondary	×	×	✓	✓	×	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Erakor	Primary	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Rafaremauroi (Ifira)	Primary	×	×	✓	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Port Quimie	Primary	×	×	✓	×	✓	×	✓	×	×	×	✓	×	×	✓	×	×	✓	×	×	×	×	×	×	×	×	
	Tavalapa	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Leimarowia (Moso)	Primary	×	×	×	×	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Votlo	Primary	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Gudfala Health Centre (NTM)	Secondary	×	✓	✓	✓	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Vanuatu Family Health	Primary	×	×	✓	✓	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Kampusum Hed (Wan Smol Bag)	Primary	×	×	✓	×	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	White Sands (Iatalakei)	Secondary	×	×	✓	✓	✓	✓	×	✓	×	×	×	✓	✓	×	×	✓	✓	×	✓	×	✓	✓	×	×	×	
	Green Hill	Secondary	×	×	✓	✓	✓	✓	✓	✓	×	×	×	✓	✓	✓	✓	✓	✓	×	✓	×	✓	✓	×	×	×	
	Iet (Louieru)	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	×	×	×	✓	×	✓	×	×	×	×	×	×	
	Kitow (Nagus Kasaru)	Secondary	×	×	✓	×	✓	×	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	×	
	Imaki	Secondary	×	×	×	✓	✓	✓	✓	✓	×	✓	×	✓	✓	×	×	✓	✓	×	✓	×	✓	×	×	×	×	
	Ikiti	Primary	×	×	✓	×	✓	✓	×	✓	×	✓	×	✓	✓	×	×	✓	✓	×	✓	×	✓	×	×	×	×	
	Dillons Bay (Williams Bay)	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	×	×	×	✓	×	✓	×	×	×	×	×	×	
	Ipota	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	✓	✓	×	×	✓	✓	×	✓	×	×	×	×	×	×	
	Yorien	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	×	×	×	✓	×	✓	×	×	×	×	×	×	
	Rotobeca (Aniwa)	Primary	×	×	✓	×	✓	✓	✓	✓	×	×	×	×	×	×	×	×	×	×	×	×	✓	✓	×	×	×	
	Naukero (Futuna)	Primary	×	×	×	×	✓	✓	✓	✓	×	×	×	✓	×	×	✓	✓	×	×	×	×	×	×	×	×	×	

Province	Facility Name	Facility Level	Delivery Equipment																							Neonatal resuscitation equipment										
			Amnio hook	Blank partograph	Blood pressure apparatus	Cord clamp	Cusco's Speculum	Delivery bed	Disposable non-sterile latex gloves	Disposable sterile latex gloves	Elbow-length sterile gloves	Episiotomy scissors	Examination light	Fetal stethoscope	Forceps	Infant scale	Manual vacuum extractor	Needle holder	Oxygen tank	Pulse oximeter	Scissors or blade to cut cord	Self-inflating bag and mask (adult)	Sims Speculum	Suture material with needle	Thermometer	Towel for drying newborn	Suction bulb (multi-use)	Suction bulb (single use)	Incubator	Newborn suction catheter	Newborn bag and mask (size 1)	Newborn bag and mask (size 0)	Electric suction pump	Resuscitation table		
Shefa	Vila Central Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓	✓	✓	✓	✗	✗	✓	✗	✗	✓	✗	✗	✓	✗	✗	✗	✓	✓	✓	✓	✓	✗	✓		
	Lenakel	Secondary	✓	✓	✓	✗	✓	✓	✓	✗	✗	✗	✗	✓	✗	✗	✓	✓	✗	✓	✗	✗	✓	✓	✗	✗	✗	✗	✓	✗	✗	✗	✓	✗		
	Vaemali	Secondary	✗	✓	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✓	✓	✗	✓	✗	✗	✓	✓	✗	✓	✓	✓	✓	✓	✓	✓	✗	✓		
	Saupia (Paunangisu)	Secondary	✗	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✓	✓	✓	✓	✓	✗	✗	✗	✓	✓	✓	✓	✓		
	Silimauroi	Secondary	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗	✓	✓	✗	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✓	✓	✓	✓	✗	
	Erasa (Numbatri)	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	St Camille de Iel (Namburu)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Teiwaikara (Freshwota)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Wellu	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Anabrou Special Needs Clinic	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	K.B. Kaluwat Memorial	Secondary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Family Care Centre	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Novo Medical Centre	Tertiary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Vanuatu Private Hospital	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Medical Options Vanuatu	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Amauri (Lelepa)	Primary	✗	✗	✓	✓	✓	✓	✗	✗	✗	✓	✗	✗	✓	✗	✓	✗	✗	✗	✓	✗	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Ngala	Primary	✗	✗	✓	✓	✗	✓	✗	✗	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Burumba	Primary	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Vaemauri	Secondary	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✓	✗	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Amboh (Tongariki)	Primary	✗	✗	✓	✓	✓	✗	✓	✗	✗	✓	✗	✗	✓	✗	✓	✗	✓	✗	✓	✓	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Marowia (Emau)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Silmoli (Nguna)	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Maurifanga (Imere)	Secondary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Erakor	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Rafaremauri (Ifira)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Port Quimie	Primary	✗	✗	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	
	Tavalapa	Primary	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Leimarowia (Moso)	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Votlo	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Gudfala Health Centre (NTM)	Secondary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Vanuatu Family Health	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Kampushum Hed (White Sands) (Iatalakei)	Primary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Green Hill	Secondary	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✓	✓	✓	✓	✗	✓	✗	✗	✗	✓	✓	✓	✗	✓
	Ilet (Louieru)	Primary	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✗	✗	✓	✗	✗	✓	✓	✓	✗	✗
	Kitow (Nagus Kasaru)	Secondary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Imaki	Secondary	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✗	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✓	✓	✓	✓	
	Ikiti	Primary	✗	✗	✓	✓	✓	✓	✓	✗	✗	✓	✗	✗	✗	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	Dillions Bay (Williams Bay)	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✗	✗	✓	✗	✗	✗	✓	✓	✗	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	Ipota	Primary	✗	✗	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✗	✓	✗	✗	✗	✓	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	Yorien	Primary	✓	✗	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗
	Rotobeca (Aniwa)	Primary	✗	✗	✓	✓	✗	✓	✓	✗	✓	✗	✗	✗	✗	✗	✓	✗	✗	✗	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗
	Naukero (Futuna)	Primary	✗	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	

Province	Facility Name	Facility Level	Availability of trained staff				Availability of services			BEmONC	BEmONC Signal Functions												CEmONC	CEmONC Functions				
			Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly		Sexual and Gender-based Violence	Fully BEmONC Compliant	Provides prevention & treatment of eclampsia & pre-eclampsia	Has magnesium sulfate, calcium gluconate, and antihypertensives in delivery room	Provides uterotonic drugs	Provides parenteral antibiotics	Has antibiotics in stock in delivery room on day of visit	Provides removal of retained products of conception	Provides basic neonatal resuscitation	Has functional resuscitation bag and mask size 1 for term babies	Has resuscitation bag and mask size 1 in delivery room	Has functional resuscitation bag and mask size 0 for preterm babies		Has resuscitation bag and mask size 0 in delivery room	Provides manual removal of placenta	Provides instrumental deliveries	Fully CEmONC Compliant	Provides emergency blood transfusions
Shefa	Loanialu (Kapelpel)	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Port Narvin	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	✓	✓	x	x	✓	x	x	x	x	✓	x	x	x	x	x
	Iounanen	Primary	x	x	✓	x	✓	✓	✓	✓	x	✓	x	x	x	x	✓	✓	x	✓	x	✓	✓	x	x	x	x	x
	Ikuarmanu	Primary	x	x	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Tanyepa	Primary	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Lamlu (St Raphael)	Primary	x	x	x	✓	✓	✓	✓	x	x	x	✓	✓	x	x	✓	✓	x	✓	x	✓	x	x	x	x	✓	✓
	Port Resolution	Primary	x	x	✓	✓	✓	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Northern Provincial Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	x	✓	✓	✓	✓
	Norsup	Secondary	✓	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	✓	x	x	x	x
	Lolowai	Secondary	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	✓	✓	✓
	Mataka	Secondary	x	x	✓	x	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	x	✓	✓	x	✓	x	x
Loh	Secondary	x	x	✓	x	✓	✓	✓	✓	x	x	✓	x	✓	✓	✓	✓	✓	x	✓	x	✓	x	x	x	x	x	
Wings of Hope	Secondary	✓	✓	x	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	✓	✓	✓	
Tafea	Nodamasan	Primary	x	x	✓	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Robul (Lequel)	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Hanington (Vetuboso)	Primary	x	x	✓	✓	✓	✓	✓	✓	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	x	✓	x	x	x	x	x
	Qaet Vaes	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	x	✓	x	x	✓	x	✓	✓	x	x	x	x
	Sarawia	Primary	x	x	✓	✓	✓	✓	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x
	Lehali	Primary	x	x	x	x	✓	✓	✓	x	x	✓	x	x	✓	✓	x	x	x	x	x	x	✓	x	x	x	x	x
	Womal Dolap	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	✓	✓	x	✓	✓	✓	✓	x	✓	x	x	x	x	x	x	x
	Malau	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x	x	x	x
	Port Olry	Secondary	x	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	x	✓	x	x	x	x	x	x	✓	x	x	x	x	x
	Tasmalum	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	✓	x	✓	✓	x	✓	x	✓	x	x	x	x	x
	Nokuku	Secondary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Avunatari	Secondary	x	x	✓	✓	✓	✓	x	✓	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Banaviti	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Maternal Child Health Clinic (MCH)	Primary	x	x	✓	✓	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Pelvus	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Tiroas	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Lamalvatu	Primary	x	x	x	✓	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
Medical Santo (Church of Christ Mini Hospital)	Secondary	✓	✓	✓	✓	✓	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Natawa	Primary	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Torba	Hog Harbour	Primary	x	x	✓	✓	✓	✓	x	x	x	x	✓	x	x	✓	x	x	✓	x	✓	x	x	x	x	x	x	x
	Vulesepe	Secondary	x	x	✓	x	✓	✓	x	✓	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x
	Capricon	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Tasiriki	Secondary	x	x	✓	✓	✓	✓	x	✓	x	✓	✓	x	✓	x	✓	x	x	x	x	x	✓	x	x	x	x	x
	Sulemauri	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Tasmate	Primary	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Wunpuku	Primary	x	x	✓	✓	✓	✓	x	x	x	x	✓	x	✓	✓	x	x	x	x	x	✓	x	x	x	x	x	x
	Sarakata	Primary	x	x	✓	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Atariboe	Primary	x	x	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x

Province	Facility Name	Facility Level	Delivery Equipment																								Neonatal resuscitation equipment								
			Amnio hook	Blank partograph	Blood pressure apparatus	Cord clamp	Cusco's Speculum	Delivery bed	Disposable non-sterile latex gloves	Disposable sterile latex gloves	Elbow-length sterile gloves	Episiotomy scissors	Examination light	Fetal stethoscope	Forceps	Infant scale	Manual vacuum extractor	Needle holder	Oxygen tank	Pulse oximeter	Scissors or blade to cut cord	Self-inflating bag and mask (adult)	Sims Speculum	Suture material with needle	Thermometer	Towel for drying newborn	Suction bulb (multi-use)	Suction bulb (single use)	Incubator	Newborn suction catheter	Newborn bag and mask (size I)	Newborn bag and mask (size D)	Electric suction pump	Resuscitation table	
Shefa	Loanialu (Kapelpel)	Primary	✓	x	✓	✓	x	x	✓	x	x	✓	✓	✓	✓	x	x	✓	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	✓	✓	x	x		
	Port Narvin	Primary	x	x	✓	✓	✓	✓	✓	x	✓	x	x	x	✓	x	✓	x	x	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	
	Iounanen	Primary	✓	x	✓	✓	✓	✓	✓	x	✓	x	✓	x	✓	✓	x	x	x	✓	x	x	✓	x	x	x	x	x	x	x	✓	✓	x	✓	
	Ikuarmanu	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Tanyepa	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Lamlu (St Raphael)	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	x	x	✓	x	✓	✓	✓	x	✓	✓	✓	✓	✓	x	x	✓	✓	x	✓		
	Port Resolution	Primary	x	x	x	✓	✓	✓	✓	✓	x	x	✓	✓	✓	x	✓	x	x	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	
	Northern Provincial Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	x	✓	x	✓	x	✓	x	✓	x	x	x	x	x	x	✓	✓	x	x	✓	
	Norsup	Secondary	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	x	✓	✓	x	✓	✓	x	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	✓	✓	✓	
	Lolowai	Secondary	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	✓	✓	✓	✓	✓	
	Mataka	Secondary	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	x	✓	x	x	✓	x	x	✓	✓	✓	x	x	x	x	✓	x	x	x	x	
	Loh	Secondary	✓	✓	✓	✓	✓	✓	✓	x	✓	x	x	✓	x	x	✓	x	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	x	✓	✓	x	x	
Tafea	Wings of Hope	Secondary	✓	✓	✓	✓	✓	x	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	✓		
	Nodamasan	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Robul (Lequel)	Primary	✓	x	✓	x	x	✓	x	✓	x	x	x	x	✓	x	x	x	x	x	✓	x	✓	✓	✓	x	✓	x	x	x	x	x	x	x	
	Hanington (Vetuboso)	Primary	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	x	✓	x	✓	x	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	✓	x	✓	
	Qaet Vaes	Secondary	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	x	✓	x	✓	x	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	x	x	x	✓	x	
	Sarawia	Primary	✓	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	✓	✓	x	✓	x	x	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	
	Lehali	Primary	✓	✓	✓	✓	x	x	✓	x	x	✓	x	✓	✓	x	✓	x	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x	x	✓	
	Womal Dolap	Primary	✓	✓	✓	x	x	x	✓	✓	✓	x	x	x	✓	✓	✓	x	x	x	✓	✓	✓	✓	✓	✓	x	x	x	x	x	✓	✓	x	x
	Malau	Secondary	✓	✓	x	✓	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	✓	x	✓	✓	✓	x	x	x	x	x	✓	x	x	x	
	Port Olry	Secondary	✓	✓	x	✓	✓	✓	✓	x	x	x	✓	x	✓	x	✓	x	x	✓	✓	x	x	✓	✓	✓	x	x	x	x	✓	x	x	x	
	Tasmalum	Secondary	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	x	x	x	x	x	x	✓	✓	✓	✓	✓	x	x	x	x	x	✓	✓	x	x		
	Nokuku	Secondary	x	x	✓	✓	x	x	✓	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	
	Avunatari	Secondary	✓	✓	x	✓	✓	✓	✓	✓	x	x	✓	x	✓	✓	✓	x	x	✓	✓	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	
	Banaviti	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Maternal Child Health Clinic (MCH)	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Pelvus	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Tiroas	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Lamalvatu	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	
	Medical Santo (Church of Christ Mini Hospital)	Secondary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	
	Natawa	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
Torba	Hog Harbour	Primary	x	x	✓	✓	✓	✓	✓	x	x	✓	x	x	x	✓	x	x	✓	✓	✓	x	✓	✓	✓	x	x	x	x	✓	✓	x	x	x	
	Vulesepe	Secondary	x	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	x	x	x	✓	✓	x	x	x	
	Capricon	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Tasiriki	Secondary	x	✓	x	✓	x	✓	✓	x	x	x	✓	x	✓	x	✓	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	
	Sulemauri	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Tasmate	Primary	x	✓	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	✓	x	x	x	x	x	x	x	x	x	
	Wunpuku	Primary	✓	x	✓	✓	✓	✓	✓	✓	x	x	✓	x	x	x	✓	x	x	✓	x	x	✓	✓	✓	x	x	✓	x	✓	x	x	x	x	
	Sarakata	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Atariboe	Primary	✓	x	✓	✓	✓	✓	x	x	✓	x	✓	✓	x	✓	✓	x	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	✓	x	x	x	x	

Province	Facility Name	Facility Level	Availability of trained staff				Availability of services				BEmONC	BEmONC Signal Functions												CEmONC	CEmONC Functions				
			Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly	Sexual and Gender-based Violence		Fully BEmONC Compliant	Provides prevention & treatment of eclampsia & pre-eclampsia	Has magnesium sulfate, calcium gluconate, and antihypertensives in delivery room	Provides uterotonic drugs	Provides parenteral antibiotics	Has antibiotics in stock in delivery room on day of visit	Provides removal of retained products of conception	Provides basic neonatal resuscitation	Has functional resuscitation bag and mask size 1 for term babies	Has resuscitation bag and mask size 1 in delivery room	Has functional resuscitation bag and mask size 0 for preterm babies	Has resuscitation bag and mask size 0 in delivery room		Provides manual removal of placenta	Provides instrumental deliveries	Fully CEmONC Compliant	Provides emergency blood transfusions	Provides Caesarean Sections
Sanma	Aore	Primary	x	x	✓	x	✓	x	x	x	x																x	x	x
	Fanafo	Secondary	x	x	✓	✓	✓	x	✓	✓	x																x	x	x
	Tataikala	Primary	x	x	✓	x	✓	x	x	x	x																x	x	x
	Wailapa (Isu)	Primary	x	x	x	x	✓	x	x	x	x					✓											x	x	x
	Bene	Secondary	x	x	x	x	x	x	x	x	x																x	x	x
	Wusi (Ioseph Mape)	Primary	x	x	✓	x	✓	✓	x	x	x								✓								x	x	x
	Kole	Primary	x	x	x	x	✓	x	✓	x	x																x	x	x
	Rustron	Primary	x	x	✓	x	✓	x	✓	✓	x																x	x	x
	Sara	Primary	x	x	x	x	x	x	x	x	x																x	x	x
	Selei	Primary	x	x	✓	x	✓	✓	✓	x	x					✓											x	x	x
	Tutuba	Primary	x	x	✓	x	✓	x	x	x	x																x	x	x
	Vaturei (Iarailand)	Primary	x	x	✓	x	✓	x	✓	✓	x																x	x	x
	Paparama	Primary	x	x	x	x	✓	x	x	x	x																x	x	x
	Wunavae	Primary	x	x	x	x	✓	x	x	x	x																x	x	x
	Matevulu College	Primary	x	x	x	x	✓	x	✓	✓	x																x	x	x
	Sapi (Nabulvaravara)	Primary	x	x	x	x	✓	x	x	✓	x																x	x	x
	Penour (Lelesvare)	Primary	x	x	x	x	✓	x	x	x	x																x	x	x
	Family Health (VFHA)	Primary	x	x	✓	✓	✓	x	✓	✓	x																x	x	x
	Neil Thomas Ministries (NTM)	Primary	x	x	✓	x	✓	x	x	x	x																x	x	x
	Abwatuntora (Mauna)	Secondary	x	x	✓	✓	✓	✓	✓	✓	x				✓	✓	x	✓			✓	x	✓	x			x	x	x
	Baie Barrier	Primary	x	x	✓	x	✓	✓	x	✓	x																x	x	x
	Kerembe	Secondary	x	x	✓	x	✓	✓	x	✓	x											✓	x	✓	✓		x	✓	x
	Melsisi	Secondary	x	x	✓	x	✓	x	x	✓	x																x	x	x
	Nduindui	Secondary	x	x	✓	✓	✓	✓	✓	x	x				✓	✓	✓				✓	x	✓	✓			x	x	x
	Lesasa	Primary	x	x	x	x	✓	x	x	✓	x																x	x	x
	Asanvari	Primary	x	x	✓	x	✓	✓	✓	✓	x						✓										x	x	x
	Aligu (Renbura)	Primary	x	x	✓	x	✓	✓	x	x	x								✓			✓	x	✓			x	x	x
	Aute	Primary	x	x	✓	x	✓	✓	✓	x	x				✓				✓			✓	x	✓	x		x	x	x
	Bwatnapni	Primary	x	x	✓	x	✓	✓	✓	x	x				✓				✓			✓	x	✓	x		x	x	x
	Naleoleo	Primary	x	x	✓	x	x	x	x	x	x																x	x	x
	Latano	Primary	x	x	x	✓	✓	✓	x	x	x								✓			✓	x	✓	x		x	x	x
	Lelevia (Neyroro)	Primary	x	x	✓	x	✓	✓	x	x	x																x	x	x
	Namaram	Primary	x	x	✓	x	✓	✓	✓	✓	x				✓	x			✓			✓	x	✓	x		x	x	x
	Nasawa	Primary	x	x	✓	✓	✓	✓	✓	x	x				✓				✓			✓	x	✓	x		x	x	x
	Point Cross	Primary	x	x	✓	x	✓	x	x	x	x								✓			✓	x	✓	x		x	x	x
	Pangi	Secondary	x	x	✓	✓	✓	✓	✓	✓	x				✓				✓	x			x	✓	✓		x	x	x
Ranmawat	Primary	x	x	✓	x	✓	x	✓	x	x																x	x	x	
Ledungsivi	Secondary	x	x	✓	x	✓	✓	x	✓	x				✓				✓			✓	x	✓			x	x	x	
Naviso (Mamaluvanua)	Primary	x	x	✓	x	✓	✓	✓	x	x						✓										x	x	x	
Angoro	Primary	x	x	✓	x	✓	✓	✓	✓	x						✓										x	x	x	
Enkul	Primary	✓	x	✓	x	✓	✓	✓	x	x				✓				✓			✓	x	✓	x		x	x	x	
Tari Ilo (Nabarangiut)	Primary	x	x	✓	x	✓	✓	✓	✓	x				✓	✓	✓		✓	✓			✓	✓			x	x	x	
Vandue	Primary	x	x	✓	x	✓	x	✓	✓	x																x	x	x	

Province	Facility Name	Facility Level	Delivery Equipment																										Neonatal resuscitation equipment							
			Amnio hook	Blank partograph	Blood pressure apparatus	Cord clamp	Cusco's Speculum	Delivery bed	Disposable non-sterile latex gloves	Disposable sterile latex gloves	Elbow-length sterile gloves	Episiotomy scissors	Examination light	Fetal stethoscope	Forceps	Infant scale	Manual vacuum extractor	Needle holder	Oxygen tank	Pulse oximeter	Scissors or blade to cut cord	Self-inflating bag and mask (adult)	Sims Speculum	Suture material with needle	Thermometer	Towel for drying newborn	Suction bulb (multi-use)	Suction bulb (single use)	Incubator	Newborn suction catheter	Newborn bag and mask (size 1)	Newborn bag and mask (size 0)	Electric suction pump	Resuscitation table		
Sanma	Aore	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Fanafo	Secondary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Tataikala	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Wailapa (Isu)	Primary	x	x	✓	✓	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x		
	Bene	Secondary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Wusi (Ioseph Mape)	Primary	x	x	✓	✓	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	✓	x	x	x	✓	x	x	x	x	x	x	✓	x	x	x		
	Kole	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Rustron	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Sara	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Selei	Primary	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x	✓	✓	✓	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	x		
	Tutuba	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x		
	Vaturei (Iarailand)	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Paparama	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Wunavae	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Matevulu College	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Sapi (Nabulvaravara)	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	
	Penour (Lelesvare)	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Family Health (VFHA)	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	
	Neil Thomas Ministries (NTM)	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Abwatuntora (Mauna)	Secondary	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	x	✓	x	x	✓	✓	x	✓	x	✓	x	x	x	✓	✓	✓	✓	x	✓	
	Baie Barrier	Primary	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	✓	x	✓	x	✓	x	✓	✓	x	x	✓	✓	x	x	x	x	x	x	x	x	x	x	
	Kerembei	Secondary	✓	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	x	✓	x	✓	x	✓	x	✓	
	Melsisi	Secondary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Nduindui	Secondary	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	x	✓	✓	✓	✓	✓	x	✓	✓	✓	x	x	✓	✓	✓	✓	x	✓	✓	
	Lesasa	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Asanvari	Primary	x	x	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	x	✓	x	x	✓	x	x	✓	✓	✓	✓	x	x	x	x	x	x	x	x	x	
	Aligu (Renbura)	Primary	✓	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	x	✓	x	x	✓	x	x	✓	✓	x	x	x	x	x	x	✓	✓	✓	x	x
	Aute	Primary	✓	x	✓	x	✓	x	x	x	x	✓	x	✓	✓	x	✓	x	x	✓	x	✓	✓	x	✓	✓	x	x	x	x	✓	✓	✓	✓	x	x
	Bwatnapni	Primary	x	✓	✓	✓	✓	x	✓	✓	x	x	x	✓	✓	x	x	✓	x	x	✓	✓	x	✓	✓	x	✓	✓	x	x	x	✓	✓	✓	x	x
	Naleoleo	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Latano	Primary	✓	x	✓	✓	✓	✓	✓	✓	x	x	x	✓	x	x	x	x	x	x	x	x	x	✓	✓	x	x	x	x	x	✓	✓	✓	x	x	
	Lelevia (Neyroro)	Primary	x	x	✓	✓	✓	x	✓	✓	x	✓	x	✓	x	x	✓	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x
	Namaram	Primary	✓	x	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	✓	x	x	✓	✓	✓	x	✓	✓	x	x	x	x	✓	✓	✓	✓	x	x	
	Nasawa	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	✓	✓	✓	x	x	x	x	✓	✓	✓	✓	x	✓
	Point Cross	Primary	x	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	x	x
	Pangi	Secondary	x	✓	✓	✓	✓	✓	✓	✓	x	✓	x	x	✓	✓	✓	✓	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	✓	x	x	x	✓	
	Ranmawat	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Ledungsivi	Secondary	x	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	x	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	x	✓
	Naviso (Mamaluanua)	Primary	x	x	x	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	x	✓	x	x	✓	x	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x
	Angoro	Primary	x	✓	x	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	x	✓	x	x	✓	x	x	✓	✓	x	x	x	x	✓	x	x	x	x	x	x
	Enkul	Primary	x	✓	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	✓	x	x	✓	x	x	✓	✓	✓	✓	✓	✓	x	x	x	✓	✓	✓	✓	x	x
	Tari Ilo (Nabarangiut)	Primary	✓	x	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	✓	✓	✓	x	x	✓	✓	✓	✓	✓	✓	x	x	x	x	✓	✓	✓	✓	x	x
	Vandue	Primary	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

Province	Facility Name	Facility Level	Availability of trained staff				Availability of services			BEmONC	BEmONC Signal Functions													CEmONC	CEmONC Functions			
			Medical Doctor	Specialist Doctor	Nurse	Midwife	Family Planning	Delivery	Adolescent and Youth Friendly		Sexual and Gender-based Violence	Fully BEmONC Compliant	Provides prevention & treatment of eclampsia & pre-eclampsia	Has magnesium sulfate, calcium gluconate, and antihypertensives in delivery room	Provides uterotonic drugs	Provides parenteral antibiotics	Has antibiotics in stock in delivery room on day of visit	Provides removal of retained products of conception	Provides basic neonatal resuscitation	Has functional resuscitation bag and mask size 1 for term babies	Has resuscitation bag and mask size 1 in delivery room	Has functional resuscitation bag and mask size 0 for preterm babies	Has resuscitation bag and mask size 0 in delivery room		Provides manual removal of placenta	Provides instrumental deliveries	Fully CEmONC Compliant	Provides emergency blood transfusions
Penama	Saramauri	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	x	✓	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x
	Mann (Walaha)	Primary	x	x	✓	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Lamap	Secondary	x	x	✓	x	✓	✓	✓	x	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	South West Bay (Wintua)	Secondary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Nebul	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Utas	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	✓	✓	✓	✓	x	✓	✓	✓	x	✓	x	x	x	x	x	x	x
	Baiap	Secondary	x	x	✓	✓	✓	✓	x	✓	x	✓	x	x	x	x	✓	✓	x	✓	x	✓	x	x	x	x	x	x
	Liro	Secondary	x	x	✓	✓	✓	✓	✓	✓	x	✓	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	x	x	x	x	x
	Sameou	Primary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Aulua	Primary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Tisman	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Carolyn Bay	Primary	x	x	x	✓	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Akhamb	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Vinmavis	Primary	x	x	✓	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Unmet	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Leviamp	Primary	x	x	✓	x	✓	✓	✓	✓	x	✓	✓	✓	✓	x	x	✓	✓	x	✓	x	✓	x	x	x	x	x
	Tanmaru	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Tontar	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Atchin	Secondary	x	x	✓	✓	✓	✓	x	x	x	✓	✓	✓	x	✓	✓	x	x	x	x	x	✓	x	x	x	x	x
	Wallarano	Secondary	x	x	✓	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Vao	Primary	x	x	x	✓	✓	✓	✓	x	x	x	✓	✓	x	✓	✓	✓	x	✓	x	✓	x	x	x	x	x	x
	Rensarie	Primary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x
	Olal	Primary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Endu	Primary	x	x	✓	x	✓	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Port Vato (Melumlum)	Primary	x	x	✓	x	✓	✓	✓	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x
	Lehili	Primary	x	x	✓	x	✓	✓	✓	✓	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x
Malampa	Pesena	Primary	x	x	✓	x	✓	✓	x	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	Amelatin (Lambubu)	Primary	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Maskelynes (Vanmaur)	Primary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Uripiv	Primary	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Espigles Bay	Secondary	x	x	x	x	✓	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
	Bonvor	Primary	x	x	✓	x	✓	✓	x	x	x	x	x	x	x	x	x	✓	x	✓	x	x	x	x	x	x	x	x

Province	Facility Name	Facility Level	Delivery Equipment																					Neonatal resuscitation equipment												
			Amnio hook	Blank partograph	Blood pressure apparatus	Cord clamp	Cusco's Speculum	Delivery bed	Disposable non-sterile latex gloves	Disposable sterile latex gloves	Elbow-length sterile gloves	Episiotomy scissors	Examination light	Fetal stethoscope	Forceps	Infant scale	Manual vacuum extractor	Needle holder	Oxygen tank	Pulse oximeter	Scissors or blade to cut cord	Self-inflating bag and mask (adult)	Sims Speculum	Suture material with needle	Thermometer	Towel for drying newborn	Suction bulb (multi-use)	Suction bulb (single use)	Incubator	Newborn suction catheter	Newborn bag and mask (size 1)	Newborn bag and mask (size 0)	Electric suction pump	Resuscitation table		
Penama	Saramauri	Secondary	✓	✓	✓	✓	✗	✓	✓	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	
	Mann (Walaha)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Lamap	Secondary	✓	✗	✓	✓	✗	✓	✓	✓	✗	✓	✓	✗	✗	✓	✗	✓	✓	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	South West Bay (Wintua)	Secondary	✓	✗	✓	✓	✗	✓	✓	✓	✗	✓	✓	✗	✗	✓	✗	✓	✗	✗	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗	
	Nebul	Secondary	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✓	✗	✓	✗	✗	✗	✗	✓	✓	✗	✓	✓	✓	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗	
	Utas	Secondary	✓	✓	✓	✓	✓	✓	✗	✗	✓	✗	✗	✓	✓	✗	✗	✓	✓	✓	✓	✓	✗	✓	✓	✗	✓	✗	✗	✓	✓	✓	✓	✗	✗	
	Baiap	Secondary	✗	✓	✓	✓	✗	✓	✓	✓	✗	✓	✗	✓	✓	✗	✓	✓	✓	✗	✗	✓	✓	✗	✓	✗	✗	✗	✗	✗	✓	✓	✓	✓	✗	✗
	Liro	Secondary	✗	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✓	✓	✓	✓	✓	✗	✗	✓	✓	✓	✓	✓	✗	✗	✓	✗	✓	✓	✓	✓	✗	✓	
	Sameou	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Aulua	Primary	✗	✗	✓	✓	✗	✓	✓	✗	✗	✓	✗	✗	✗	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Tisman	Primary	✗	✗	✓	✓	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Carolyn Bay	Primary	✓	✗	✓	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Akhamb	Primary	✗	✗	✓	✓	✗	✓	✓	✓	✗	✗	✓	✗	✗	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	Vinmavis	Primary	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Unmet	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✓	✓	✓	
	Leviamp	Primary	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✗	✗	✓	✗	✗	✓	✓	✓	✗	✗	
	Tanmaru	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✓	✗	✓	✗	✓	✗	✗	✓	✗	✗	✓	✓	✓	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
	Tontar	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✓	✓	✓	✗	✗	✓	✓	✓	✗	✗
	Atchin	Secondary	✓	✓	✓	✓	✗	✓	✓	✓	✗	✗	✗	✓	✗	✓	✗	✓	✗	✗	✗	✗	✓	✓	✓	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	
	Wallarano	Secondary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Vao	Primary	✓	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✓	✗	✓	✗	✗	✓	✓	✓	✓	✓	✗	✗	✓	✗	✗	✗	✓	✓	✓	✗	✗
	Rensarie	Primary	✗	✓	✓	✓	✗	✓	✓	✗	✗	✗	✗	✗	✓	✗	✓	✗	✗	✓	✗	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✓	✓	✓	✗
	Olal	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Endu	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Port Vato (Melumlum)	Primary	✓	✗	✓	✓	✗	✓	✓	✓	✗	✗	✗	✗	✓	✗	✗	✗	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	
	Lehili	Primary	✓	✗	✓	✓	✓	✓	✓	✗	✗	✓	✓	✓	✓	✗	✓	✗	✗	✓	✗	✗	✓	✓	✓	✗	✗	✓	✗	✓	✓	✗	✗	✗	✗	
Malampa	Pesena	Primary	✗	✓	✓	✓	✓	✓	✓	✓	✗	✓	✗	✗	✗	✓	✗	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Amelatin (Lambubu)	Primary	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Maskelynes (Vanmaur)	Primary	✗	✗	✓	✓	✗	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✗	✗	✓	✗	✓	✓	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Uripiv	Primary	✗	✗	✓	✓	✓	✓	✓	✗	✗	✓	✓	✗	✗	✗	✓	✗	✗	✓	✗	✗	✗	✓	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗		
	Espigles Bay	Secondary	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗	✗		
	Bonvor	Primary	✓	✓	✓	✓	✗	✓	✓	✓	✗	✓	✗	✗	✗	✗	✓	✗	✗	✓	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✓	✓	✓	✗	✗	

Province	Facility Name	Facility Level	Availability of updated stock records							
			Male condoms	Female condoms	Combined oral contraceptives	Progestin-only pills	Injectable contraceptives	Intrauterine contraceptive devices	Implant contraceptives	Emergency contraceptive pills
Shefa	Vila Central Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✓
	Vaemali	Secondary	×	×	×	×	×	×	×	×
	Saupia (Paunangisu)	Secondary	×	×	×	×	×	×	×	×
	Silimauni	Secondary	×	×	×	×	×	×	×	×
	Erasa (Numbatri)	Primary	×	×	×	×	×	×	×	×
	St Camille de Ielais (Namburu)	Primary	×	×	×	×	×	×	×	×
	Teiwaikara (Freshwota)	Primary	×	×	×	×	×	×	×	×
	Wellu	Primary	×	×	×	×	×	×	×	×
	Anabrou Special Needs Clinic	Primary	×	×	×	×	×	×	×	×
	Nodamasan	Primary	×	×	×	×	×	×	×	×
	K.B. Kaluwat Memorial	Secondary	×	×	×	×	×	×	×	×
	Family Care Centre	Primary	✓	×	×	×	✓	×	×	×
	Novo Medical Centre	Tertiary	×	×	×	×	×	×	×	×
	Vanuatu Private Hospital	Primary	×	×	×	×	×	×	×	×
	Medical Options Vanuatu	Primary	×	×	×	×	×	×	×	×
	Amauri (Lelepa)	Primary	×	×	×	×	×	×	×	×
	Ngala	Primary	×	×	×	×	×	×	×	×
	Burumba	Primary	×	×	×	×	×	×	×	×
	Vaemauni	Secondary	×	×	×	×	×	×	×	×
	Amboh (Tongariki)	Primary	×	×	×	×	×	×	×	×
	Marowia (Emau)	Primary	×	×	×	×	×	×	×	×
	Silmoli (Nguna)	Primary	×	×	×	×	×	×	×	×
	Maurifanga (Imere)	Secondary	✓	✓	✓	✓	✓	✓	✓	×
	Erakor	Primary	×	×	×	×	×	×	×	×
	Rafaremauri (Ifira)	Primary	×	×	×	×	×	×	×	×
	Port Quimie	Primary	×	×	×	×	×	×	×	×
	Tavalapa	Primary	×	×	×	×	×	×	×	×
	Leimarowia (Moso)	Primary	×	×	×	×	×	×	×	×
	Votlo	Primary	×	×	×	×	×	×	×	×
	Gudfala Health Centre (NTM)	Secondary	×	×	×	×	×	×	×	×
	Vanuatu Family Health	Primary	×	×	×	×	×	×	×	×
	Kampushum Hed (Wan Smol Bag)	Primary	×	×	×	×	×	×	×	×

Province	Facility Name	Facility Level	Availability of updated stock records									
			Male condoms	Female condoms	Combined oral contraceptives	Progestin-only pills	Injectable contraceptives	Intrauterine contraceptive devices	Implant contraceptives	Emergency contraceptive pills		
Tafea	Lenakel	Secondary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	White Sands (Iatalakei)	Secondary	×	×	×	×	×	×	×	×	×	×
	Green Hill	Secondary	×	×	×	×	×	×	×	×	×	×
	Iet (Louieru)	Primary	×	×	×	×	×	×	×	×	×	×
	Kitow (Nagus Kasaru)	Secondary	×	×	×	×	×	×	×	×	×	×
	Imaki	Secondary	×	×	×	×	×	×	×	×	×	×
	Ikiti	Primary	×	×	×	×	×	×	×	×	×	×
	Dillons Bay (Williams Bay)	Primary	×	×	×	×	×	×	×	×	×	×
	Ipota	Primary	×	×	×	×	×	×	×	×	×	×
	Yorien	Primary	×	×	×	×	×	×	×	×	×	×
	Rotobeca (Aniwa)	Primary	×	×	×	×	×	×	×	×	×	×
	Naukero (Futuna)	Primary	×	×	×	×	×	×	×	×	×	×
	Loialu (Kapelpe)	Primary	×	×	×	×	×	×	×	×	×	×
	Port Narvin	Primary	×	×	×	×	×	×	×	×	×	×
	Iouananen	Primary	×	×	×	×	×	×	×	×	×	×
	Ikuarmanu	Primary	×	×	×	×	×	×	×	×	×	×
	Tanyepa	Primary	×	×	×	×	×	×	×	×	×	×
	Lamilu (St Raphael)	Primary	×	×	×	×	×	×	×	×	×	×
	Port Resolution	Primary	×	×	×	×	×	×	×	×	×	×
	Mataka	Secondary	×	×	×	×	×	×	×	×	×	×
	Loh	Secondary	×	×	×	×	×	×	×	×	×	×
Torba	Wings of Hope	Secondary	×	×	×	×	×	×	×	×	×	×
	Robul (Lequel)	Primary	×	×	×	×	×	×	×	×	×	×
	Hanington (Vetuboso)	Primary	×	×	×	×	×	×	×	×	×	×
	Qaet Vaes	Secondary	×	×	×	×	×	×	×	×	×	×
	Sarawia	Primary	×	×	×	×	×	×	×	×	×	×
	Lehali	Primary	✓	✓	✓	×	×	×	×	×	×	×
	Womal Dolap	Primary	×	×	×	×	×	×	×	×	×	×
	Northern Provincial Hospital	Tertiary	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Malau	Secondary	×	×	×	×	×	×	×	×	×	×
	Port Olry	Secondary	×	✓	×	✓	×	×	×	×	×	×
Sanma	Tasmalum	Secondary	×	×	×	×	×	×	×	×	×	×
	Nokuku	Secondary	×	×	×	×	×	×	×	×	×	×
	Avunatari	Secondary	×	×	×	×	×	×	×	×	×	×
	Banaviti	Primary	×	×	×	×	×	×	×	×	×	×
	Maternal Child Health Clinic (MCH)	Primary	×	×	×	×	×	×	×	×	×	×
	Pelvus	Primary	×	×	×	×	×	×	×	×	×	×
	Tiroas	Primary	×	×	×	×	×	×	×	×	×	×
	Lamalvatu	Primary	×	×	×	×	×	×	×	×	×	×

Province	Facility Name	Facility Level	Availability of updated stock records							
			Male condoms	Female condoms	Combined oral contraceptives	Progestin-only pills	Injectable contraceptives	Intrauterine contraceptive devices	Implant contraceptives	Emergency contraceptive pills
Sanma	Medical Santo (Church of Christ Mini Hospital)	Secondary	x	x	x	x	x	x	x	x
	Natawa	Primary	x	x	x	x	x	x	x	x
	Aore	Primary	x	x	x	x	x	x	x	x
	Pesena	Primary	x	x	x	x	x	x	x	x
	Saramauri	Secondary	x	x	x	x	x	x	x	x
	Hog Harbour	Primary	x	✓	✓	x	✓	x	x	x
	Vulesepe	Secondary	x	x	x	x	x	x	x	x
	Capricorn	Primary	x	x	x	x	x	x	x	x
	Tasiriki	Secondary	x	x	x	x	x	x	x	x
	Sulemauri	Primary	x	x	x	x	x	x	x	x
	Tasmate	Primary	x	x	x	x	x	x	x	x
	Wunpuku	Primary	x	x	x	x	x	x	x	x
	Sarakata	Primary	x	x	x	x	x	x	x	x
	Atariboe	Primary	x	x	x	x	x	x	x	x
	Fanafo	Secondary	x	x	x	x	x	x	x	x
	Tataikala	Primary	x	x	x	x	x	x	x	x
	Wailapa (Isu)	Primary	x	x	x	x	x	x	x	x
	Bene	Secondary	x	x	x	x	x	x	x	x
	Wusi (Joseph Mape)	Primary	x	x	x	x	x	x	x	x
	Kole	Primary	x	x	x	x	x	x	x	x
	Rustron	Primary	x	x	x	x	x	x	x	x
	Sara	Primary	x	x	x	x	x	x	x	x
	Selei	Primary	x	x	x	x	x	x	x	x
	Tutuba	Primary	x	x	x	x	x	x	x	x
	Vaturei (Iariland)	Primary	x	x	x	x	x	x	x	x
	Paparama	Primary	x	x	x	x	x	x	x	x
	Wunavae	Primary	x	x	x	x	x	x	x	x
	Matevulu College	Primary	x	x	x	x	x	x	x	x
	Sapi (Nabulvaravara)	Primary	x	x	x	x	x	x	x	x
	Penour (Lelesvare)	Primary	x	x	x	x	x	x	x	x
	Family Health (VFHA)	Primary	x	x	x	x	x	x	x	x
	Neil Thomas Ministries (NTM)	Primary	x	x	x	x	x	x	x	x

Province	Facility Name	Facility Level	Availability of updated stock records									
			Male condoms	Female condoms	Combined oral contraceptives	Progestin-only pills	Injectable contraceptives	Intrauterine contraceptive devices	Implant contraceptives	Emergency contraceptive pills		
Penama	Lolawai	Secondary	✓	✓	✓	✓	✓	✓	✓	✓		
	Abwatuntora (Mauna)	Secondary	×	×	×	×	×	×	×	×		
	Baie Barrier	Primary	×	×	×	×	×	×	×	×		
	Kerembei	Secondary	×	×	×	×	×	×	×	×		
	Melsisi	Secondary	×	×	×	×	×	×	×	×		
	Nduindui	Secondary	×	×	×	×	×	×	×	×		
	Lesasa	Primary	×	×	×	×	×	×	×	×		
	Asanvari	Primary	×	×	×	×	×	×	×	×		
	Aligu (Renbura)	Primary	×	×	×	×	×	×	×	×		
	Aute	Primary	×	×	×	×	×	×	×	×		
	Bwatnapni	Primary	×	×	×	×	×	×	×	×		
	Naleoleo	Primary	×	×	×	×	×	×	×	×		
	Latano	Primary	×	×	×	×	×	×	×	×		
	Lelevia (Neyroro)	Primary	×	×	×	×	×	×	×	×		
	Namaram	Primary	×	×	×	×	×	×	×	×		
	Nasawa	Primary	×	×	✓	×	×	×	×	×		
	Point Cross	Primary	×	×	×	×	×	×	×	×		
	Pangi	Secondary	×	×	×	×	×	×	×	×		
	Ranmawat	Primary	×	×	×	×	×	×	×	×		
	Ledungsivi	Secondary	×	×	×	×	×	×	×	×		
	Naviso (Mamaluvauna)	Primary	×	×	×	×	×	×	×	×		
	Angoro	Primary	×	×	×	×	×	×	×	×		
	Enkul	Primary	×	×	×	×	×	×	×	×		
	Tari Ilo (Nabarangiut)	Primary	×	×	×	×	×	×	×	×		
	Vandue	Primary	×	×	×	×	×	×	×	×		
	Mann (Walaha)	Primary	×	×	×	×	×	×	×	×		
	Norsup	Secondary	×	×	×	×	×	×	×	×		
	Lamap	Secondary	×	×	×	×	×	×	×	×		
	South West Bay (Wintua)	Secondary	×	×	×	×	×	×	×	×		
	Nebul	Secondary	×	×	×	×	×	×	×	×		
	Ufas	Secondary	✓	×	✓	✓	✓	×	✓	✓		
	Baiap	Secondary	×	×	×	×	×	×	×	×		
	Liro	Secondary	×	×	×	×	×	×	×	×		
Malampa	Sameou	Primary	×	×	×	×	×	×	×	×		
	Aulia	Primary	×	×	×	×	×	×	×	×		
	Tisman	Primary	×	×	×	×	×	×	×	×		
	Carolyn Bay	Primary	×	×	×	×	×	×	×	×		
	Akhamb	Primary	×	×	×	×	×	×	×	×		
	Vinmavis	Primary	×	×	×	×	×	×	×	×		

Province	Facility Name	Facility Level	Availability of updated stock records							
			Male condoms	Female condoms	Combined oral contraceptives	Progestin-only pills	Injectable contraceptives	Intrauterine contraceptive devices	Implant contraceptives	Emergency contraceptive pills
Malampa	Unmet	Primary	x	x	x	x	x	x	x	x
	Leviamp	Primary	x	x	x	x	x	x	x	x
	Tanmaru	Primary	x	x	x	x	x	x	x	x
	Tontar	Primary	x	x	x	x	x	x	x	x
	Atchin	Secondary	x	x	x	x	x	x	x	x
	Wallarano	Secondary	x	x	x	x	x	x	x	x
	Vao	Primary	x	x	x	x	x	x	x	x
	Rensarie	Primary	x	x	x	x	x	x	x	x
	Olal	Primary	x	x	x	x	x	x	x	x
	Endu	Primary	x	x	x	x	x	x	x	x
	Port Vato (Melumlum)	Primary	x	x	x	x	x	x	x	x
	Lehili	Primary	x	x	x	x	x	x	x	x
	Amelatin (Lambubu)	Primary	x	x	x	x	x	x	x	x
	Maskelynes (Vanmaur)	Primary	x	x	x	x	x	x	x	x
	Uripiv	Primary	x	x	x	x	x	x	x	x
	Espigles Bay	Secondary	x	x	x	x	x	x	x	x
	Bonvor	Primary	x	x	x	x	x	x	x	x

COVID-19 Practices

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Malampa	Akhamb	Dispensary	No	No	Yes (partial)	Monthly	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Amelatin (Lambubu)	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	No	Yes	No	No	When possible, but not always
	Atchin	Health Centre	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	No	No	No	No	No
	Aulua	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	Yes	No	Yes	Yes, always
	Baiap	Health Centre	No	No	No (could not name any on this list)	Daily	Answer satisfactory	Yes (verified)	No	No	No	When possible, but not always
	Bonvor	Dispensary	No	No	Yes (listed all available surfaces)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Carolyn Bay	Dispensary	No	No	Yes (partial)	Monthly	Answer not satisfactory	No	Yes	No	Yes	Yes, always
	Endu	Dispensary	No	No	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Espigles Bay	Health Centre	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Lamap	Health Centre	No	No	Yes (partial)	Monthly	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Lehili	Dispensary	No	No	Not applicable	Don't know	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Leviamp	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Liro	Health Centre	No	No	Yes (partial)	Don't know	Answer not satisfactory	No	Yes	No	No	Yes, always
	Maskelynes (Vanmaur)	Dispensary	No	No	Yes (partial)	Monthly	Answer not satisfactory	No	Yes	No	Yes	Yes, always
	Nebul	Health Centre	No	No	Not applicable	Don't know	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Norsup	Hospital	No	Yes	Yes (partial)	Weekly	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Olal	Dispensary	No	No	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Port Vato (Melumlum)	Dispensary	No	No	Yes (partial)	Monthly	Answer not satisfactory	Yes (verified)	Yes	Yes	Yes	Yes, always
	Rensarie	Dispensary	No	No	Yes (listed all available surfaces)	Monthly	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Sameou	Dispensary	No	No	Not applicable	Not applicable	Answer not satisfactory	No	No	No	No	No
	South West Bay (Wintua)	Health Centre	No	No	Yes (partial)	Monthly	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Malampa	Tanmaru	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Tisman	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Tontar	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Unmet	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Uripiv	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Utas	Health Centre	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Vao	Dispensary	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	No	No	No	No	No
	Vinmavis	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	No	No	No	No
	Wallarano	Health Centre	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Abwatuntora (Mauna)	Health Centre	No	No	Yes (partial)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
Penama	Aligu (Renbura)	Dispensary	No	No	Yes (listed all available surfaces)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Angoro	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Asanvari	Dispensary	No	No	Yes (listed all available surfaces)	Monthly	Answer satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Aute	Dispensary	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	No	Yes	No	No	Yes, always
	Baie Barrier	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Bwatnapni	Dispensary	No	No	Yes (listed all available surfaces)	Weekly	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Enkul	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Kerembe	Health Centre	No	No	Yes (listed all available surfaces)	Weekly	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Latano	Dispensary	No	No	No (could not name any on this list)	Monthly	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Ledungsivi	Health Centre	No	No	Yes (partial)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Lelevia (Neyroro)	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Penama	Lesasa	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	No	No	No	No
	Lolowai	Hospital	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	Yes	Yes	When possible, but not always
	Mann (Walaha)	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Melsisi	Health Centre	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Naleoleo	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	No	No	No	No
	Namaram	Dispensary	No	No	Yes (listed all available surfaces)	Not applicable	Answer satisfactory	Reported (not able to verify)	No	No	No	Yes, always
	Nasawa	Dispensary	No	No	Yes (listed all available surfaces)	Weekly	Answer satisfactory	Yes (verified)	Yes	Yes	No	Yes, always
	Naviso (Mamaluwanua)	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	Yes	No	No	When possible, but not always
	Nduindui	Health Centre	No	No	Yes (partial)	Weekly	Answer satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Pangi	Health Centre	Yes	Yes	No (could not name any on this list)	Don't know	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Point Cross	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	No	No	No	When possible, but not always
	Ranmawat	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Tari Ilo (Nabarangiut)	Dispensary	No	No	Yes (listed all available surfaces)	Not applicable	Answer satisfactory	Yes (verified)	No	No	No	No
	Vandue	Dispensary	No	No	Yes (listed all available surfaces)	Monthly	Answer satisfactory	No	No	No	No	No
Sanma	Aore	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Atariboe	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Avunatari	Health Centre	Yes	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Banaviti	Dispensary	No	No	Not applicable	Daily	Answer not satisfactory	No	No	No	No	No
	Bene	Health Centre	No	No	Not applicable	Not applicable	Answer not satisfactory	No	Yes	No	No	When possible, but not always
	Capricon	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Family Health (VFHA)	Clinic	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	Yes	Yes	When possible, but not always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Sanma	Fanafo	Health Centre	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	No	No	No	No
	Hog Harbour	Dispensary	No	No	No (could not name any on this list)	Weekly	Answer not satisfactory	No	No	No	No	No
	Kole	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Lamalvatu	Clinic	No	No	Yes (partial)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Malau	Health Centre	No	No	Yes (partial)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Maternal Child Health Clinic (MCH)	Clinic	No	Yes	Yes (partial)	Weekly	Answer not satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Matevulu College	Clinic	No	No	No (could not name any on this list)	Twice a week	Answer not satisfactory	No	Yes	No	Yes	When possible, but not always
	Medical Santo (Church of Christ Mini Hospital)	Health Centre	Yes	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Natawa	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Reported (not able to verify)	No	No	No	No
	Neil Thomas Ministries (NTM)	Clinic	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Nokuku	Health Centre	No	No	Not applicable	Not applicable	Answer not satisfactory	No	No	No	No	No
	Northern Provincial Hospital	Hospital	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	Yes	Yes	Yes, always
	Paparama	Dispensary	No	No	Not applicable	Not applicable	Answer not satisfactory	No	No	No	No	No
	Pelvus	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	No	No	No	No
	Penour (Lelesvare)	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	No	No	No	No
	Pesena	Dispensary	No	No	Yes (partial)	Not applicable	Answer not satisfactory	No	No	No	No	No
Santo	Port Olry	Health Centre	No	No	No (could not name any on this list)	Twice a week	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Rustron	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	No	No	No	No	No
	Sapi (Nabulvaravara)	Dispensary	No	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Sanma	Sara	Dispensary	No	No	Not applicable	Not applicable	Answer not satisfactory	No	No	No	No	No
	Sarakata	Dispensary	Yes	Yes	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Saramauri	Health Centre	No	No	Yes (listed all available surfaces)	Twice a week	Answer not satisfactory	No	Yes	No	Yes	Yes, always
	Selei	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Sulemauri	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	No	No	No	No
	Tasiriki	Health Centre	No	No	No (could not name any on this list)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Tasmalum	Health Centre	No	No	Not applicable	Daily	Answer not satisfactory	Yes (verified)	Yes	No	Yes	When possible, but not always
	Tasmate	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	No	No	No	No
	Tataikala	Dispensary	No	No	No (could not name any on this list)	Not applicable	Answer not satisfactory	No	No	No	No	No
	Tiroas	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	No	No	No	When possible, but not always
	Tutuba	Dispensary	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	Reported (not able to verify)	No	No	No	No
	Vaturei (Iraileland)	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Vulesepe	Health Centre	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Wailapa (Isu)	Dispensary	No	No	No (could not name any on this list)	Twice a week	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	When possible, but not always
	Wunavae	Dispensary	No	No	No (could not name any on this list)	Not applicable	Answer not satisfactory	No	No	No	No	No
	Wunpuku	Dispensary	No	No	Yes (partial)	Not applicable	Answer not satisfactory	No	No	No	No	No
Shefa	Wusi (Ioseph Mape)	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	No	Yes	No	Yes	When possible, but not always
	Amauri (Lelepa)	Dispensary	Yes	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	No	Yes	Yes	When possible, but not always
	Amboh (Tongariki)	Dispensary	No	No	Not applicable	Don't know	Answer not satisfactory	Yes (verified)	No	No	No	No
	Anabrou Special Needs Clinic	Clinic	No	Don't know	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Burumba	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Shefa	Erakor	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Yes (verified)	No	No	No	No
	Erasa (Numbatri)	Dispensary	No	No	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Family Care Centre	Clinic	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Gudfala Health Centre (NTM)	Health Centre	No	Yes	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	K.B. Kaluat Memorial	Health Centre	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Kampushum Hed (Wan Smol Bag)	Clinic	No	No	Not applicable	Daily	Answer not satisfactory	Yes (verified)	No	No	No	No
	Leimarowia (Mosu)	Dispensary	No	Don't know	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Marowia (Emau)	Dispensary	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	Reported (not able to verify)	No	No	No	No
	Maurifanga (Imere)	Health Centre	No	No	Yes (listed all available surfaces)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Medical Options Vanuatu	Clinic	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Ngala	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	No	No	No	No
	Nodamasan	Clinic	No	No	No (could not name any on this list)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Novo Medical Centre	Clinic	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	Yes	Yes	Yes, always
	Port Quimie	Dispensary	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Rafaremauri (fira)	Dispensary	Yes	Yes	Yes (listed all available surfaces)	Weekly	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	Yes, always
	Saupia (Paunangisu)	Health Centre	No	No	Yes (partial)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	Silimaui	Health Centre	Yes	No	No (could not name any on this list)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	Silimoli (Nguna)	Dispensary	No	Yes	Yes (partial)	Daily	Answer satisfactory	Reported (not able to verify)	No	No	No	No
	St Camille de Ielis (Namburu)	Dispensary	No	Yes	Yes (partial)	Twice a week	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	Tavalapa	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	Teiwaikara (Freshwota)	Dispensary	No	No	No (could not name any on this list)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	No	No	No

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Shefa	Vaemali	Health Centre	No	No	No (could not name any on this list)	Don't know	Answer not satisfactory	No	Yes	No	Yes	Yes, always
	Vaemaui	Health Centre	No	Don't know	No (could not name any on this list)	Weekly	Answer not satisfactory	Reported (not able to verify)	Yes	No	No	No
	Vanuatu Family Health	Clinic	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Reported (not able to verify)	Yes	Yes	Yes	Yes, always
	Vanuatu Private Hospital	Clinic	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Vila Central Hospital	Hospital	No	Yes	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Votfo	Dispensary	No	Don't know	Not applicable	Don't know	Answer not satisfactory	No	No	No	No	No
	Wellu	Dispensary	No	No	Not applicable	Don't know	Answer satisfactory	Reported (not able to verify)	Yes	Yes	Yes	Yes, always
	Dillons Bay (Williams Bay)	Dispensary	No	No	Yes (partial)	Twice a week	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Green Hill	Health Centre	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Ilet (Louieru)	Dispensary	Yes	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
Tafea	Ikiti	Dispensary	No	Yes	Not applicable	Don't know	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Ikuarmanu	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	No	No	No	No	No
	Imaki	Health Centre	Yes	No	Yes (partial)	Don't know	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Iounanen	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Ipota	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Kitow (Nagus Kasaru)	Health Centre	No	No	Yes (partial)	Daily	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	When possible, but not always
	Lamulu (St Raphael)	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Lenakel	Hospital	Yes	Yes	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	Yes	Yes	When possible, but not always
	Loanialu (Kapelpel)	Clinic	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Naukero (Futuna)	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer not satisfactory	No	No	No	No	No
	Port Narvin	Dispensary	No	No	Yes (partial)	Daily	Answer not satisfactory	Yes (verified)	Yes	No	No	Yes, always

Province	Facility name	Facility type	COVID-19 guidance?	Infection prevention training?	Do you know high-touch areas to be cleaned during COVID?	How frequently should high touch areas be cleaned by chemicals during COVID?	Describe what you use to clean surfaces in patient care areas	Does this facility have designated cleaning and disinfecting supplies?	Do you wash your mops and buckets between uses?	When washing your buckets and mops, do you use hot water?	Do you disinfect your buckets and mops after washing them?	Do you allow your buckets and mops to dry completely between uses?
Tafea	Port Resolution	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Rotobeca (Aniwa)	Dispensary	No	No	Not applicable	Not applicable	Answer not satisfactory	No	No	No	No	No
	Tanyepa	Dispensary	Yes	No	Yes (partial)	Twice a week	Answer not satisfactory	No	No	No	No	No
	White Sands (Iatalakei)	Health Centre	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Yorien	Dispensary	Yes	No	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Hanington (Vetuboso)	Dispensary	No	Yes	Yes (partial)	Not applicable	Answer not satisfactory	Reported (not able to verify)	Yes	No	Yes	Yes, always
	Lehali	Dispensary	No	No	Yes (listed all available surfaces)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
Torba	Loh	Health Centre	Yes	Yes	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Mataka	Health Centre	Yes	Yes	Not applicable	Not applicable	Answer satisfactory	No	Yes	No	Yes	Yes, always
	Qaet Vaes	Hospital	Yes	No	Yes (listed all available surfaces)	Weekly	Answer not satisfactory	Yes (verified)	Yes	No	No	When possible, but not always
	Robul (Lequel)	Dispensary	No	No	No (could not name any on this list)	Weekly	Answer not satisfactory	Yes (verified)	Yes	No	No	Yes, always
	Sarawia	Dispensary	No	No	Yes (partial)	Daily	Answer satisfactory	No	No	No	No	No
	Wings of Hope	Clinic	No	Yes	Yes (partial)	Daily	Answer satisfactory	Yes (verified)	Yes	No	Yes	Yes, always
	Womol Dolap	Dispensary	No	Yes	Not applicable	Not applicable	Answer not satisfactory	No	Yes	No	No	Yes, always

Province	Facility name	Facility type	Electricity available	Type of water source	Water available on premise	Water available from this source on the day of the visit	Toilets available at facility	Soap and water (or alcohol based rub) currently available at toilets	Soap and water (or alcohol based rub) currently available in consultation rooms
Malampa	Akhamb	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	Yes
	Amelatin (Lambubu)	Dispensary	No	Piped into facility	Yes	Yes	No	Yes	Yes
	Atchin	Health Centre	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	Yes	No
	Aulua	Dispensary	Yes	Piped onto facility grounds	No - off premises up to 500m	Yes	Yes	Yes	No
	Baiap	Health Centre	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	Bonvor	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	Yes
	Carolyn Bay	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Endu	Dispensary	No	Piped into facility	No - more than 500m away	Yes	Yes	Yes	No
	Espigles Bay	Health Centre	Yes	Rainwater collection	Yes	No	Yes	No	No
	Lamap	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	No	Yes
	Lehili	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	Leviamp	Dispensary	No	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Liro	Health Centre	No	Rainwater collection	No - more than 500m away	Yes	Yes	No	Yes
	Maskelynes (Vanmaur)	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	No
	Nebul	Health Centre	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	No
	Norsup	Hospital	Yes	Piped into facility	No - off premises up to 500m	Yes	Yes	Yes	Yes
	Olal	Dispensary	No	Rainwater collection	No - more than 500m away	Yes	Yes	No	No
	Port Vato (Melulum)	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	No
	Rensarie	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	No	No
	Sameou	Dispensary	No	Piped onto facility grounds	No - more than 500m away	Yes	Yes	No	No
	South West Bay (Wintua)	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Tanmaru	Dispensary	Yes	Piped into facility	No - more than 500m away	Yes	Yes	Yes	No
	Tisman	Dispensary	Yes	Rainwater collection	No - off premises up to 500m	Yes	Yes	Yes	No
	Tontar	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No

Province	Facility name	Facility type	Electricity available	Type of water source	Water available on premise	Water available from this source on the day of the visit	Toilets available at facility	Soap and water (or alcohol based rub) currently available at toilets	Soap and water (or alcohol based rub) currently available in consultation rooms
Malampa	Unmet	Dispensary	No	Piped into facility	No - more than 500m away		Yes	No	No
	Uripiv	Dispensary	No	Piped onto facility grounds	Yes	Yes	Yes	Yes	No
	Utas	Health Centre	Yes	Piped onto facility grounds	No - off premises up to 500m	Yes	Yes	No	Yes
	Vao	Dispensary	No	No water source			Yes	No	Yes
	Vinmavis	Dispensary	No	Piped onto facility grounds	No - more than 500m away		Yes	No	Yes
	Wallarano	Health Centre	Yes	Rainwater collection	Yes	Yes	No		No
	Abwatuntora (Mauna)	Health Centre	No	Protected dug well	No - more than 500m away		Yes	Yes	No
	Aligu (Renbura)	Dispensary	Yes	Tanker truck	Yes	Yes	Yes	Yes	Yes
	Angoro	Dispensary	No	Rainwater collection	Yes	Yes	Yes	Yes	No
	Asanvari	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	Yes	No
	Aute	Dispensary	No	Protected dug well	No - more than 500m away		Yes	No	No
	Baie Barrier	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	No
	Bwatnapni	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	Enkul	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	Yes	No
Penama	Kerembei	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Latano	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Ledungsivi	Health Centre	Yes	Rainwater collection	Yes	Yes	Yes	No	No
	Lelevia (Neyroro)	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Lesasa	Dispensary	No	Rainwater collection	Yes	Yes	Yes	No	Yes
	Lolowai	Hospital	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Mann (Walaha)	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	Yes	Yes
	Melsisi	Health Centre	No	Public tap/Standpipe	No - off premises up to 500m	Yes	Yes	Yes	No
	Naleoleo	Dispensary	Yes	Tanker truck	No - more than 500m away		Yes	No	No
	Namaram	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Nasawa	Dispensary	Yes	Tanker truck	Yes	Yes	Yes	Yes	Yes
	Naviso (Mamaluvana)	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Nduindui	Health Centre	Yes	Tanker truck	Yes	Yes	Yes	No	Yes
	Pangi	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Point Cross	Dispensary	No	Piped into facility	Yes	Yes	Yes	No	No
	Ranmawat	Dispensary	No	Piped into facility	Yes	Yes	Yes	No	No
	Tari Ilo (Nabarangiut)	Dispensary	No	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Vandue	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No

Province	Facility name	Facility type	Electricity available	Type of water source	Water available on premise	Water available from this source on the day of the visit	Toilets available at facility	Soap and water (or alcohol based rub) currently available at toilets	Soap and water (or alcohol based rub) currently available in consultation rooms
Sanma	Aore	Dispensary	Yes	Public tap/Standpipe	Yes	No	No	No	No
	Atariboe	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	Avunatari	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Banaviti	Dispensary	No	Rainwater collection	Yes	Yes	No	No	No
	Bene	Health Centre	No	Rainwater collection	Yes	Yes	Yes	No	Yes
	Capricon	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	Yes	Yes
	Family Health (VFHA)	Clinic	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Fanafo	Health Centre	Yes	Rainwater collection	Yes	Yes	Yes	No	No
	Hog Harbour	Dispensary	No	Rainwater collection	No - more than 500m away	Yes	Yes	No	No
	Kole	Dispensary	No	Rainwater collection	Yes	Yes	Yes	No	No
	Lamalvatu	Clinic	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Malau	Health Centre	No	Rainwater collection	Yes	Yes	Yes	No	No
	Maternal Child Health Clinic (MCH)	Clinic	Yes	Piped onto facility grounds	No - more than 500m away	Yes	Yes	Yes	Yes
	Matevulu College	Clinic	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Medical Santo (Church of Christ Mini Hospital)	Health Centre	Yes	Public tap/Standpipe	Yes	Yes	Yes	Yes	Yes
	Natawa	Dispensary	Yes	No water source	Yes	Yes	Yes	No	Yes
	Neil Thomas Ministries (NTM)	Clinic	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Nokuku	Health Centre	Yes	Rainwater collection	Yes	No	Yes	No	No
	Northern Provincial Hospital	Hospital	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Paparama	Dispensary	No	Rainwater collection	Yes	Yes	Yes	No	No
	Pelvus	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Penour (Lelesvare)	Dispensary	Yes	Piped into facility	Yes	Yes	No	No	No
	Pesena	Dispensary	Yes	Rainwater collection	Yes	No	Yes	No	No
	Port Olry	Health Centre	Yes	Piped into facility	Yes	No	Yes	No	Yes
	Rustron	Dispensary	No	Rainwater collection	Yes	Yes	Yes	No	No
	Sapi (Nabulvaravara)	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	Yes	No
	Sara	Dispensary	No	Unprotected dug well	No - more than 500m away	Yes	Yes	No	No
	Sarakata	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Saramauri	Health Centre	Yes	Piped into facility	No - off premises up to 500m	Yes	Yes	No	Yes
	Selei	Dispensary	Yes	Piped onto facility grounds	Yes	Yes	Yes	Yes	Yes

Province	Facility name	Facility type	Electricity available	Type of water source	Water available on premise	Water available from this source on the day of the visit	Toilets available at facility	Soap and water (or alcohol based rub) currently available at toilets	Soap and water (or alcohol based rub) currently available in consultation rooms
Shefa	Medical Options Vanuatu	Clinic	Yes	Piped into facility	No - more than 500m away		Yes	Yes	No
	Ngala	Dispensary	Yes	Piped into facility	No - more than 500m away		Yes	No	Yes
	Nodamasan	Clinic	Yes	Piped into facility	No - more than 500m away		Yes	No	Yes
	Novo Medical Centre	Clinic	Yes	Piped into facility	No - more than 500m away		Yes	Yes	Yes
	Port Quimie	Dispensary	Yes	Piped into facility	No - more than 500m away		Yes	Yes	Yes
	Rafaremauri (Ifira)	Dispensary	Yes	Piped into facility	No - more than 500m away		Yes	Yes	Yes
	Saupia (Paunangisu)	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Silimaui	Health Centre	No	Piped onto facility grounds	Yes	Yes	Yes	Yes	No
	Simoli (Nguna)	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	St Camille de Ielis (Namburu)	Dispensary	Yes	Piped onto facility grounds	Yes	Yes	Yes	Yes	No
	Tavalapa	Dispensary	No	Piped into facility	No - off premises up to 500m	Yes	Yes	No	No
	Teiwaikara (Freshwota)	Dispensary	Yes	Piped into facility	No - off premises up to 500m	Yes	Yes	Yes	Yes
	Vaemali	Health Centre	Yes	Piped into facility	No - more than 500m away		Yes	No	No
	Vaemauri	Health Centre	Yes	Rainwater collection	Yes	Yes	Yes	Yes	No
	Vanuatu Family Health	Clinic	Yes	Piped into facility	No - off premises up to 500m	Yes	Yes	Yes	Yes
	Vanuatu Private Hospital	Clinic	Yes	Piped into facility	No - more than 500m away		Yes	Yes	Yes
	Vila Central Hospital	Hospital	Yes	Piped into facility	No - more than 500m away		Yes	Yes	Yes
	Votlo	Dispensary	No	No water source			Yes	No	No
	Wellu	Dispensary	Yes	Piped into facility	No - off premises up to 500m	Yes	Yes	Yes	Yes
	Dillons Bay (Williams Bay)	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
Tafea	Green Hill	Health Centre	Yes	Rainwater collection	Yes	Yes	No		Yes
	Iet (Louieru)	Dispensary	Yes	Piped into facility	Yes	No	Yes	Yes	Yes
	Ikiti	Dispensary	Yes	Piped into facility	No - more than 500m away		Yes	No	Yes
	Ikuarmanu	Dispensary	Yes	Piped onto facility grounds	Yes	Yes	Yes	Yes	No

Province	Facility name	Facility type	Electricity available	Type of water source	Water available on premise	Water available from this source on the day of the visit	Toilets available at facility	Soap and water (or alcohol based rub) currently available at toilets	Soap and water (or alcohol based rub) currently available in consultation rooms
Tafea	Imaki	Health Centre	Yes	Piped onto facility grounds	Yes	Yes	Yes	No	Yes
	Iounanen	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	Iputa	Dispensary	No	Piped into facility	Yes	Yes	Yes	No	Yes
	Kitow (Nagus Kasaru)	Health Centre	No	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Lamlu (St Raphael)	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	Yes	Yes
	Lenakel	Hospital	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Loanialu (Kapelip)	Clinic	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Naukero (Futuna)	Dispensary	Yes	Piped into facility	Yes	Yes	No	No	No
	Port Narvin	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Port Resolution	Dispensary	Yes	Cart with small tank/drum	Yes	Yes	Yes	Yes	Yes
	Rotobeca (Aniwa)	Dispensary	Yes	Rainwater collection	Yes	Yes	No	No	No
	Tanyepa	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	Yes
	White Sands (latalakei)	Health Centre	Yes	Piped into facility	Yes	Yes	Yes	No	Yes
	Yorien	Dispensary	Yes	Piped into facility	Yes	Yes	Yes	Yes	Yes
	Harington (Vetuboso)	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	Yes	Yes
Torba	Lehali	Dispensary	Yes	Piped onto facility grounds	Yes	Yes	Yes	No	No
	Loh	Health Centre	No	Rainwater collection	Yes	Yes	Yes	No	No
	Mataka	Health Centre	Yes	Rainwater collection	Yes	Yes	Yes	No	No
	Qaet Vaes	Hospital	Yes	Piped into facility	Yes	Yes	Yes	No	No
	Robul (Lequel)	Dispensary	No	Rainwater collection	Yes	No	Yes	No	No
	Sarawia	Dispensary	No	Rainwater collection	No - off premises up to 500m	Yes	No	No	No
	Wings of Hope	Clinic	Yes	Rainwater collection	Yes	Yes	Yes	Yes	Yes
	Womal Dolap	Dispensary	Yes	Rainwater collection	Yes	Yes	Yes	No	No

Cold Chain

Province	Facility name	Facility type	Vaccine cold box	Does facility have cold chain equipment?	What kind of cold chain equipment does facility have?	Source of power for cold chain equipment
Malampa	Akhamb	Dispensary	Observed, functional	Yes	Ice box	
	Amelatin (Lambubu)	Dispensary	Not available	No		
	Atchin	Health Centre	Observed, functional	Yes	Ice box	
	Aulua	Dispensary	Observed, functional	Yes	Ice box	
	Baia	Health Centre	Observed, functional	Yes	Other	
	Bonvor	Dispensary	Observed, functional	Yes	Ice box	
	Carolyn Bay	Dispensary	Observed, functional	Yes	Ice box	
	Endu	Dispensary	Observed, non-functional	Don't know	Ice box	
	Espigles Bay	Health Centre	Observed, functional	Yes	Ice box	
	Lamap	Health Centre	Observed, functional	Yes	Ice box	
	Lehili	Dispensary	Observed, functional	Yes	Ice box	
	Leviamp	Dispensary	Observed, functional	Yes	Ice box	
	Liro	Health Centre	Observed, functional	Yes	Ice box	
	Maskelynes (Vanmaur)	Dispensary	Observed, non-functional	Don't know	Ice box	
	Nebul	Health Centre	Observed, functional	Don't know	Other	
	Norsup	Hospital	Observed, functional	Yes	Ice box	
	Olal	Dispensary	Not available	No		
	Port Vato (Melumlum)	Dispensary	Not available	No		
	Rensarie	Dispensary	Observed, functional	Yes	Ice box	
	Sameou	Dispensary	Not available	Other		
	South West Bay (Wintua)	Health Centre	Observed, functional	Yes	Ice box	
	Tanmaru	Dispensary	Observed, functional	Yes	Ice box	
	Tisman	Dispensary	Observed, functional	Yes	Ice box	
	Tontar	Dispensary	Observed, functional	Yes	Ice box	
	Unmet	Dispensary	Observed, functional	Yes	Ice box	
	Uripiv	Dispensary	Not available	No		
	Utas	Health Centre	Observed, functional	Yes	Ice box	
	Vao	Dispensary	Observed, functional	Yes	Ice box	
	Vimavis	Dispensary	Not available	No		
	Wallarano	Health Centre	Observed, functional	Yes	Ice box	
Penama	Abwatuntora (Mauna)	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Aligu (Renbura)	Dispensary	Not available	No		
	Angoro	Dispensary	Observed, functional	Yes	Ice box	
	Asanvari	Dispensary	Observed, non-functional	Don't know	Ice box	
	Aute	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Bale Barrier	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Bwatnapni	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar

Province	Facility name	Facility type	Vaccine cold box	Does facility have cold chain equipment?	What kind of cold chain equipment does facility have?	Source of power for cold chain equipment
Penama	Enkul	Dispensary	Not available	No		
	Kerembei	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Latano	Dispensary	Not available	No		
	Ledungsivi	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Lelevia (Neyoro)	Dispensary	Not available	No		
	Lesasa	Dispensary	Not available	No		
	Lolowai	Hospital	Observed, functional	Yes	Ice box	
	Mann (Walaha)	Dispensary	Not available	No		
	Melsisi	Health Centre	Not available	No		
	Naleoleo	Dispensary	Not available	No		
	Namaram	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Nasawa	Dispensary	Observed, functional	Yes	Ice box	
	Naviso (Mamaluvana)	Dispensary	Observed, functional	Yes	Ice box	
	Nduindui	Health Centre	Observed, functional	Yes	Ice box	
	Pangi	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Point Cross	Dispensary	Observed, non-functional	Don't know	Refrigerator/freezer	Solar
	Rannawat	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Tari Ilo (Nabarangiut)	Dispensary	Observed, functional	Yes	Ice box	
	Vandue	Dispensary	Not available	No		
	Aore	Dispensary	Not available	No		
Sanma	Atariboe	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Avunatari	Health Centre	Observed, functional	Don't know	Refrigerator/freezer	Solar
	Banaviti	Dispensary	Not available	No		
	Bene	Health Centre	Not available	Other		
	Capricon	Dispensary	Not available	No		
	Family Health (VFHA)	Clinic	Not available	Other		
	Fanafo	Health Centre	Not available	Yes	Refrigerator/freezer	Power from national grid
	Hog Harbour	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Kole	Dispensary	Not available	Other		
	Lamalvatu	Clinic	Not available	Other		
	Malau	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Maternal Child Health Clinic (MCH)	Clinic	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Matevulu College	Clinic	Not available	No		
	Medical Santo (Church of Christ Mini Hospital)	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Natawa	Dispensary	Not available	No		
	Neil Thomas Ministries (NTM)	Clinic	Not available	Other		
	Nokuku	Health Centre	Observed, functional	Yes	Other	

Province	Facility name	Facility type	Vaccine cold box	Does facility have cold chain equipment?	What kind of cold chain equipment does facility have?	Source of power for cold chain equipment
Sanma	Northern Provincial Hospital	Hospital	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Paparama	Dispensary	Not available	Yes	No current cold chain at facility	
	Pelvus	Dispensary	Not available	No		
	Penour (Lelesvare)	Dispensary	Not available	No		
	Pesena	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Port Olry	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Rustron	Dispensary	Observed, non-functional	Don't know	Refrigerator/freezer	Solar
	Sapi (Nabulvaravara)	Dispensary	Not available	No		
	Sara	Dispensary	Not available	No		
	Sarakata	Dispensary	Not available	Other		
	Saramauri	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Selei	Dispensary	Observed, non-functional	Yes	Refrigerator/freezer	Solar
	Sulemauri	Dispensary	Not available	Don't know	Other	
	Tasiriki	Health Centre	Observed, functional	Yes	Ice box	
	Tasmalum	Health Centre	Observed, functional	Yes	Other	
	Tasmate	Dispensary	Not available	No		
	Tatakala	Dispensary	Observed, functional	No		
	Tiroas	Dispensary	Not available	Other		
	Tutuba	Dispensary	Not available	Other		
	Vaturei (Iarailand)	Dispensary	Not available	No		
	Vulesepe	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Wailapa (Isu)	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Wunavae	Dispensary	Not available	No		
	Wunpuku	Dispensary	Observed, functional	Yes	Other	
	Wusi (Ioseph Mape)	Dispensary	Not available	No		
	Amauri (Lelepa)	Dispensary	Observed, functional	Yes	Ice box	
	Amboh (Tongariki)	Dispensary	Observed, non-functional	Don't know	Ice box	
Shefa	Anabrou Special Needs Clinic	Clinic	Not available	Don't know		
	Burumba	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Erakor	Dispensary	Not available	Yes	Ice box	
	Erasa (Numbatri)	Dispensary	Not available	No		
	Family Care Centre	Clinic	Not available	Don't know		
	Gudfala Health Centre (NTM)	Health Centre	Not available	No		
	K.B. Kalwuat Memorial	Health Centre	Not available	No		
	Kampushum Hed (Wan Smol Bag)	Clinic	Not available	No		
	Leimarowia (Moso)	Dispensary	Not available	Don't know	Ice box	
	Marowia (Emau)	Dispensary	Observed, functional	Don't know	Ice box	
	Maurifanga (Imere)	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Medical Options Vanuatu	Clinic	Not available	No		
	Ngala	Dispensary	Observed, functional	Don't know	Refrigerator/freezer	Solar
	Nodamasan	Clinic	Not available	No		
	Novo Medical Centre	Clinic	Not available	No		

Province	Facility name	Facility type	Vaccine cold box	Does facility have cold chain equipment?	What kind of cold chain equipment does facility have?	Source of power for cold chain equipment
Shefa	Port Quimie	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Rafaremauri (Ifira)	Dispensary	Not available	Yes	Refrigerator/freezer	Power from national grid
	Saupia (Paunangisu)	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Silimaui	Health Centre	Observed, functional	Yes	Ice box	
	Silmoli (Nguna)	Dispensary	Not available	Yes	Ice box	
	St Camille de Ielis (Namburu)	Dispensary	Not available	Yes	Ice box	
	Tavalapa	Dispensary	Observed, functional	Yes	Ice box	
	Teiwaikara (Freshwota)	Dispensary	Not available	No		
	Vaemali	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Vaemaui	Health Centre	Observed, functional	Yes	Ice box	
	Vanuatu Family Health	Clinic	Not available	Yes	Refrigerator/freezer	Power from national grid
	Vanuatu Private Hospital	Clinic	Observed, functional	No		
	Vila Central Hospital	Hospital	Observed, functional	Yes	Ice box	
	Votlo	Dispensary	Not available	Don't know		
	Wellu	Dispensary	Not available	No		
	Dillons Bay (Williams Bay)	Dispensary	Not available	Yes	Refrigerator/freezer	Solar
	Green Hill	Health Centre	Not available	No		
	Iet (Louieru)	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Ikiti	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Ikuarmanu	Dispensary	Not available	Other		
Tafea	Imaki	Health Centre	Observed, non-functional	Don't know	No current cold chain at facility	
	Iounanen	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Ipota	Dispensary	Not available	Yes	Refrigerator/freezer	Solar
	K'itow (Nagus Kasaru)	Health Centre	Not available	No		
	Lamlu (St Raphael)	Dispensary	Observed, functional	Yes	Refrigerator/freezer	Solar
	Lenakel	Hospital	Observed, functional	Yes	Refrigerator/freezer	Power from national grid
	Loanialu (Kapelpel)	Clinic	Not available	No		
	Naukero (Futuna)	Dispensary	Observed, functional	Don't know	Refrigerator/freezer	Solar
	Port Narvin	Dispensary	Not available	Don't know	No current cold chain at facility	
	Port Resolution	Dispensary	Observed, functional	No		
	Rotobeca (Aniwa)	Dispensary	Not available	No		
	Tanyepa	Dispensary	Not available	No		
	White Sands (Iatalakei)	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Yorien	Dispensary	Not available	Yes	Refrigerator/freezer	Solar
	Hanington (Vetuboso)	Dispensary	Not available	No		
	Lehali	Dispensary	Observed, functional	No		
	Loh	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Mataka	Health Centre	Observed, functional	Yes	Refrigerator/freezer	Solar
	Qaet Vaes	Hospital	Observed, functional	Yes	Refrigerator/freezer	Solar
	Robul (Lequel)	Dispensary	Not available	No		
Torba	Sarawia	Dispensary	Observed, functional	Don't know	No current cold chain at facility	
	Wings of Hope	Clinic	Observed, functional	Yes	Ice box	
	Womal Dolap	Dispensary	Not available	Don't know	Ice box	



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